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ABSTRACT

Over the last several years there has been a steadily growing interest in the availability of data that can be used to track the well-being of children, largely due to national and state Kids Count projects. This report reviews 15 federal data sources from which child indicators can be assessed and tracked over time for many states and localities. The data sources are: Current Population Surveys (CPS); Decennial Census; American Housing Survey (AHS); National Assessment of Educational Programs (NAEP); Common Core of Data (CCD); Schools and Staffing Survey (SASS); Vital Statistics System; Youth Risk Behavior Surveillance System (YRBSS); Behavioral Risk Factor Surveillance System (RFFSS); National Immunization Survey (NIS); National Health Interview Survey (NHIS); Sexually Transmitted Diseases Surveillance System (STD); Pregnancy Risk Assessment Monitoring system (RPRAMS); Uniform Crime Reports (UCR); and National Crime Victimization Survey (NCNS). The review of each data source includes the following: (1) basic description of the source; (2) listing of states and localities covered; (3) significant limitations of the data; (4) listing of child well-being indicators that are produced or can be produced; (5) major publications that report state and local child indicator data from the data source; (6) description of publicly available databases from which indicators can be assessed through original analyses; (7) listing of offices that produce custom analyses of the data; and (8) listing of contact persons for publications, data purchases, and further information. In addition, the report includes appendices which list state contacts who can provide the desired information or data well before the responsible federal agency, and a quick-reference table that summarizes the child well-being measures and geographic coverage across the 15 data sources, organized by topic area. (AA)

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A GUIDE TO STATE AND LOCAL-LEVEL INDICATORS OF CHILD WELL-BEING AVAILABLE THROUGH THE FEDERAL STATISTICAL SYSTEM

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A GUIDE TO STATE AND LOCAL-LEVEL INDICATORS OF CHILD WELL-BEING AVAILABLE THROUGH THE FEDERAL STATISTICAL SYSTEM

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INTRODUCTION

Over the last several years there has been a steadily growing interest in the availability of data that can be used to track the well-being of children and their families at the state and local levels. The national and state Kids Count projects, sponsored by the Annie E. Casey Foundation, have played a substantial role in generating this interest through their annual reports on child well-being. In addition, political trends towards greater state and local control over the design and financing of social programs of importance to children have generated strong interest in such data on the part of state and local governments. In response, the Annie E. Casey Foundation funded Child Trends, Inc. to produce this report which reviews existing federal sources of state and local indicator data on children and their families.

Various federal agencies collect such data on a regular basis either directly or in cooperation with state and local governments and agencies. This report reviews some fifteen federal data sources from which child indicators can be produced and tracked over time for at least some states and localities. The data sources include surveys, the Decennial Census, the Vital Statistics system, and selected administrative data sources.

Because the focus of this report is on measures of child well-being rather than service delivery, program data (e.g., AFDC caseload and expenditure data) were not included in the review. Data from the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS) were not included because of substantial variations in data comparability across states. However, because they do provide state-specific information on important outcomes for children, a brief description of each system and contact persons are presented in Appendix J.

A review of each data source includes the following:

- a basic description of the data source;
- a listing of states and localities covered;
- significant limitations of the data;
- a listing of child well-being indicators that are produced or that can be produced;
- major publications that report state and local child indicator data from the data source;
- a description of publicly available databases from which indicators can be produced through original analyses;
- a listing of offices that produce custom analyses of the data for free or under contract;
- and a listing of contact persons for publications, data purchases, and further information.

In addition, the report includes appendices which list state contacts who can often provide the desired information or data well before the responsible federal agency, and a quick-reference table that summarizes the child well-being measures and geographic coverage across the fifteen data sources, organized by topic area.

Current Population Surveys (CPS)

Description

The Current Population Survey is a large, nationally representative survey. Its primary purpose is to provide labor force, employment, and related information on the civilian, non-institutionalized U.S. population ages 15 and older.[1] The survey is fielded monthly. In some months, additional information is collected on particular topic areas. Most of these supplements are fielded every year or two, though some are produced on a less regular basis. Of particular interest to those focusing on measures of child well-being are the March Income and Demographic Supplement, the April Child Support and Alimony Supplement, and the October School Enrollment Supplement.

The core survey questions, fielded every month, include the following information on all children in the household: age, race, ethnicity, sex, relationship to head of household, and identification of parents in the household. Employment data among adults (ages 15 and older) in the household focus on work in the previous week and, among the unemployed, on recent job search activities and characteristics of previous employment. The 12-Month Earnings file combines the data from all twelve months of the core survey during the calendar year. Though this file has fewer measures than the monthly files described below, it has a larger sample size, which allows for the production of more accurate state estimates.

The March Income and Demographic Supplement is the primary source of data from which child indicators are constructed. Detailed income and employment data covering the previous calendar year are collected for each adult ages 15 and over (including all resident parents) from which household and family income and employment profiles can be constructed. Participation in social support programs during the previous calendar year are also covered. Detailed family structure and relationship data are also collected in this supplement (see below for indicators commonly derived from this source).

The April Child Support and Alimony Supplement provides information on child support award and receipt, custody and visitation arrangements, state of residence for the noncustodial parent, and whether state and local governmental agencies are involved in the collection of support. Prior to 1992, only separated and ever-divorced women were asked for this information. Beginning in 1992, however, both never-married mothers and all single fathers were asked as well.

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[1] Armed Forces personnel living off base, or on base with their families are also included.

The October School Enrollment Supplement collects the following data for all persons age three and older in each household: highest grade completed, current enrollment status, enrollment during the previous year, grade, type of school, high school graduation status and date of graduation.

Periodicity

The Current Population Survey has been fielded since 1942. The core survey is fielded monthly. March and October Supplements are fielded once each year, and the April Supplement is fielded every other year.

Geographic Coverage

The sample sizes for individual states and localities from any single year of data are generally too small to produce acceptably accurate estimates of child well-being.[2] By combining several years of data, however, one can produce estimates for most states and for the largest metropolitan areas that are acceptably accurate for many purposes. For its annual Kids Count report, the Annie E. Casey Foundation creates estimates for all 50 states by combining five years of March CPS data. For the few child-relevant measures that can be produced from the 12-month Earnings file (which contains larger sample sizes for each state), three-year estimates were used.

Those who are interested only in estimates for larger states may find that three-year estimates based on March CPS data are acceptably accurate for many purposes. In an analysis which compared single-year, three-year, and five-year state-level estimates from the March CPS for several indicators (child poverty, youth idleness, single parent households, family income, health insurance coverage, and child support receipt), standard error estimates are reduced by about one quarter to one third by moving from a single-year to a three-year estimate.[3] A five-year estimate reduced the standard errors by about an additional fifteen percent. These reductions will differ by measure and from state to state, however. Those interested in examining standard errors on state-specific estimates for a representative set of indicators should consult O'Hare and Pollard (1995) and Pollard and Riche (1994).

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[2] Exceptions are the very largest states such as California, Texas, and New York, for which single year estimates with generally acceptable standard errors can be produced for many indicators.

[3] Smaller standard errors indicate greater accuracy of the estimates. They are necessary in order to calculate whether there has been a significant change in the value of an indicator over time.

To our knowledge, data from the April and October CPS surveys have not been used to produce state-specific estimates.[4] This is because most of the indicators of interest covered by these supplements (e.g. proportion of eligible children receiving child support) focus on a small segment of the child population. By combining several years of data, however, acceptably accurate estimates might be produced for the very largest states.[5]

Finally, for the largest states one can produce separate population sub-group estimates of particular indicators, for example by race and ethnicity, family structure, or age of child. Such analyses have been produced in the past using three-year estimates for the five largest states (California, New York, Texas, Illinois, and Florida).[6] Estimates produced for particular subgroups of children will always be less accurate than those produced for all children. Appropriate caution should be exercised when interpreting group differences based on such estimates.

Limitations

The major limitation of the Current Population Survey for the production of state-level estimates of child well-being is the small sample sizes on which estimates must be produced. Combining multiple years of data reduces the size of the problem, but accuracy remains a problem for the least populated states even using five-year estimates.

An additional limitation is presented by the methodological challenges of combining multiple years of CPS data to produce estimates. Due to a feature of the sampling frame in which there is an approximately 50 percent overlap in samples from one year to the next, the production of standard errors is quite complicated. Those interested in doing such tests are strongly encouraged to consult with the contacts listed below who have experience in producing state-specific estimates from CPS data.

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[4] Such estimates may have been produced by interested state agencies in the very largest states, but we are not aware of such efforts.

[5] Although the April Supplement is fielded only every other year, data from two (e.g., 1990 and 1992) or even three years can be combined to produce estimates.

[6] Such analyses were performed for the Comparative State of the Child project out of the Chapin Hall Center for Children, University of Chicago.

Indicators and Other Measures

Using the March Current Population Survey, many sorts of indicators can be constructed at the state level. Below we offer a list of possible indicators, including measures which have appeared in the annual Kids Count Reports by the Annie E. Casey Foundation. Other worthy indicators are surely possible given the rich information contained in this survey. Those who are interested in exploring additional possibilities are encouraged to examine the codebook for the latest March CPS. To order call Data User Services (see below).

Indicators based on data from the March CPS:

Kids Count measures:

- Median income of families with children;
- Percent of children in poverty, (<50%, <100, <150, <200%);
- Percent of children in single parent families;
- Percent of mother-headed families receiving child support;
- Percent of children without health insurance.

Additional possible measures:

- Percent of children with at least one fully employed parent (full time, full year);
- Percent of children in poor families where at least one parent works full time, full year;
- Percent of children with no parents in the labor force;
- Percent of children in families receiving AFDC or Food stamps within the last year;
- Percent of children in families receiving any assistance in last year (AFDC, Food stamps, subsidized housing, energy assistance, free or reduced price lunches);
- Percent of children who have moved within the last year;
- Percent of children living with neither parent;
- Percent of children who are minority (non-white, non-Hispanic);
- Percent of poor families with children who have some income from earnings.

Indicators available from the 12 month CPS earnings file include the following:[7]

- Percent of families with children headed by a single parent;
- Percent of teens ages 16-19 who are idle (not working and not attending school);
- Percent of teens ages 16-19 who are high school dropouts.

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[7] These three measures appeared in the 1995 edition of the national Kids Count report.

Using the April CPS Supplement, estimates for the largest states might possibly be made for the following measures:[8]

Percent of eligible children receiving child support;
Percent of children whose noncustodial parent lives in the same state.

Indicators based on data from the October CPS:

Percent of children below age 16 who are two or more years below age for grade.

Major Publications

Annie E. Casey Foundation. Kids Count Data Book: State Profiles of Child Well-Being, 1995. Baltimore: Annie E. Casey Foundation. To order call (410) 223-2890. [NOTE: This publication has been produced annually since 1990]

Although a number of Federal agencies publish state estimates of population characteristics based on data from the Current Population Survey, none publish estimates for characteristics of children, youth, or their families.

The following papers examine variations in the accuracy of CPS-generated estimates of child well-being indicators for all 50 states. They are highly recommended for anyone wishing to generate such estimates themselves. For copies, please contact Kelvin Pollard, Population Reference Bureau (see under "Custom Analyses" below).

O'Hare, William, and Kelvin Pollard. 1995. Evaluating State-Level Estimates from the Current Population Survey. Paper presented at the Annual Meeting of the Southern Demographic Association, Richmond, VA, October 19-21, 1995.

Pollard, Kelvin, and Martha Farnsworth Riche. 1994. The CPS and Kids Count: A Report to the Annie E. Casey Foundation.

Data Availability

All Current Population Survey microdata files, which contain all information for each respondent in the survey, can be ordered from the Bureau of the Census. All are available on 9-

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[8] To our knowledge, to date no state estimates have been produced using these data sources.

track tape and, by special order, on CD-ROM. In addition, March CPS surveys for 1988 and beyond are available on CD-ROM without special order.

Recent March Current Population Survey microdata files are also available over the Internet through a Census Bureau project called Surveys On-Call. Users can make extracts from the raw data files and download them to their own computers for further analysis. Data are currently available from the March 1992-95 surveys. At present, the service is free. For further information call or e-mail:

Surveys On-Call
(301) 763-8375
furukawa@census.gov or cbean@census.gov

On the World Wide Web the address is:
http://www.census.gov/ftp/pub/DES/www/welcome.html

Custom Analyses

Since 1990, the Population Reference Bureau (PRB) has been producing state estimates using March CPS data for the Annie E. Casey Foundation's Kids Count Data Book. They are open to doing contract work for other organizations to produce similar sorts of estimates.

Kelvin Pollard
Population Reference Bureau
1875 Connecticut Avenue, NW
Suite 520
Washington,. D.C. 20009-5728
(202) 483-1100

The Bureau of the Census will also produce custom tabulations from CPS data on a contract basis.

Sherry Courtland
Chief, Demographic Surveys Division
Bureau of the Census
Suitland, MD 20233
(301) 457-3811

Contact Persons

For general information on the Current Population Survey, call
Census Data User Services
Bureau of the Census
Washington, D.C. 20233-8500
(301) 457-4100
(301) 457-4611 TDD

For information on questionnaire content, call
Ronald Tucker, Chief
Current Population Surveys Branch
Demographic Surveys Division
Bureau of the Census
Suitland, MD 20233
(301) 457-3806

For information regarding child measures in the CPS, call
Martin O'Connell, Ph.D., Chief
Fertility and Family Statistics Branch
Population Division
U.S. Bureau of the Census
Suitland, MD 20233
(301) 457-2416

Decennial Census

Description

The Decennial Census is designed to provide a complete enumeration of the population and housing stock of the United States. The data are use to reapportion Congressional Districts, to allocate Federal funds to states, and for a wide variety of public and private planning purposes.

The short form, which is filled out by all households, collects the following basic information on each household member: sex, race, relationship to head of household, year of birth, marital status, and Hispanic origin. Basic descriptive data on place of residence are also obtained including property value, rent paid, tenure, number of rooms, and completeness of plumbing facilities.

The long form questionnaire, which is filled out by one in every six households asks for a great deal of additional information on household members including educational attainment, employment status, amount and source of income, occupation, place of birth, citizenship, disability status, year of immigration, language spoken in the home, and ability to speak English.

Periodicity

The decennial census has been taken every ten years since 1790. The next census is scheduled for the year 2000.

Geographic Coverage

The decennial census provides detailed population data for all parts of the United States and its possessions for areas as small as a few city blocks. The data available at the block and block-group levels are limited to the short-form questions that were asked of all households. Measures from the long-form, based on a one-in-six sampling of households, are available for all areas from the census tract level (which contain about 2,500 persons on average) on up.

Areas for which census data are commonly available include the nation, state, metropolitan area, city, zip code area, congressional district, county, minor civil division, place, census tract or block numbering area, block-group, and block. Published reports provide at least some information for places, counties, cities, congressional districts, metropolitan areas, and states. Data for smaller geographic areas (e.g., census tract, block-groups, and blocks), and many additional measures for larger geographic areas are available on CD-ROM or 9-track tape as part of the Summary Tape File series (see *Data Availability* below).

Limitations

The major limitation of the Census results from the fact that it is taken only once every ten years. As more time passes these counts become less reflective of current population characteristics, making them progressively more unsuitable as a source of data for contemporary indicators of child well-being. They also become quickly unsuitable for use in the construction of indicators of child well-being that require population estimates for the construction of percents and rates (e.g., the fertility rate among teens ages 15-19).

In an attempt to overcome some of these limitations, the Bureau of the Census is designing a new major survey called the American Communities Survey (ACS). This survey will include most or all of the questions currently on the short and long forms of the census, though exact wording may vary somewhat. Field-testing began in November of 1995, and the survey will be fielded on a continuous basis beginning in late 1998. This survey is designed to produce accurate population estimates for all states, and for all metropolitan areas in excess of 250,000 population on an annual basis. Estimates for smaller areas will be available less often, with estimates for census tracts available every five years. This survey, which may eventually replace the Census long form, is currently a top priority of the Census Bureau.

In the meantime, the Bureau of the Census does produce basic estimates of the population under age 18 by race and sex for every state on an annual basis. The Bureau also makes such estimates on an occasional basis for all counties in the U.S. County estimates for 5-year age groups by race, Hispanic origin, and sex are currently available through 1992. Estimates for 1993 will become available in the late Spring of 1996. Work is underway to make these estimates a regular part of the Bureau's population estimation program. These estimates are available over the Internet through the Census Web page (see below).

A second limitation comes from the amount of time it takes before Census estimates become available. Basic demographic measures from the 1990 Census were available down to the census block level beginning in late 1991. Measures from the long form, which is of more use to those interested in constructing indicators of child well-being, were not available until late 1992 or 1993.

A third limitation of the data is that, though the Bureau tries to reach all persons, some people are not included in the Census. This "undercount" affects all groups, but is particularly problematic for minority populations where the proportion missing may be 14 percent for some age groups.[9] The Census Bureau has calculated correction factors at the state level which can be used to create more accurate state-level counts. These state-level correction factors may not accurately correct estimates for areas below the state level, however, which may have experienced less or greater undercount than the state average (see below for a contact person to receive state correction factors).

For Census data on very small areas such as the Census block or block-group, some estimates are suppressed so that particular individuals cannot be identified. The degree of suppression differs from area to area.

Finally, as part of the redesign effort for the 2000 Census, the Bureau has been working to reduce the number of questions contained in the long form questionnaires, which means that some information available in past Censuses may not be available for the year 2000.

Indicators and Other Measures

The following is a list of child indicators that can be created from the Summary Tape File 3 (STF-3) files (see under *Data Availability*, below, for details). A more abbreviated set of measures are available from published sources. Many of these measures are also available separately by race, Hispanic origin, and/or age of child.

Percent of all households containing children.
Percent of total population under age 18.
Percent of children ages 5-17 who are linguistically isolated.
  [Note: children living in households where no person ages 14+ speaks only English, and no person ages 14+ speaks English "very well".
Percent of children who are non-Hispanic white, black, Hispanic, Native American, and Asian.
Percent of children in two-parent, single-male, single-female, and no-parent families.
Percent of children who are in institutions.
Percent of children in poverty.
  (Note: available separately by family type)
Median income of children in families.
Percent of mothers with children under age 6 who are in the labor force.
Percent of children under age 6 with both or only parent in the labor force.
Percent of families with children where no parent is in the labor force.

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[9] National Research Council. 1995. Modernizing the U.S. Census. Barry Edmunston and Charles Schultze, Editors. Washington, D.C.: National Academy Press.

(Available separately for families with children under age 6)

Percent of children living in extremely poor neighborhoods (40+% poverty).

(Note: other negative neighborhood characteristics related to family structures or high rates of labor force nonparticipation can be used alone or in combination to describe children's exposure to poor quality neighborhood environments).

Percent of youth ages 16-19 who are high school dropouts.

A more extensive list of measures can be produced at the state and metropolitan level by using 1990 Public Use Microsample (PUMS) files. These are microdata files containing complete information for a sample of individual persons and households. For example, using these files one could produce indicators of housing quality for children that are not available through the STF files.

Major Publications

The following three publications are the major printed sources of data the population from the 1990 census. Similar reports are available from 1980. These publications can be ordered from the Bureau of the Census, and are carried by many University libraries. Some state-level data are also available over the internet at http://www.census.gov/.

U.S. Bureau of the Census. 1993. 1990 Census of Population: Social and Economic Characteristics. Series 1990 CP-2-(State #) .

There is a separate publication for each state. Reports long form data for States, counties, places and minor civil divisions of 2,500+, and the state portion of Native American areas.

U.S. Bureau of the Census. 1992. 1990 Census of Population: General Population Characteristics. Series 1990 CP-1-(State #).

There is a separate publication for each state. Reports short form data for States, counties, places and minor civil divisions of 2,500+, and the state portion of Native American areas. Data are not as detailed as in the Series 1990 CP-2.

U.S. Bureau of the Census. 1992. 1990 Census of Population and Housing: Summary Population and Housing Characteristics.

For state-level estimates of child characteristics using 1990 Census data, see the following publication:

Population Reference Bureau. 1992. "The Challenge of Change: What the 1990 Census Tells About Children." Center for the Study of Social Policy, Washington, D.C.

The Bureau of the Census is seriously considering phasing out most of its printed products in favor of making data available on CD-ROM and over the Internet as part of its planning for the 2000 Census. At present it has not been determined what printed publications will continue to be produced.

Data Availability

For most purposes, those interested in social indicators at the state and local level that are not available in publications will need to refer to the Summary Tape File Series. These files contain detailed frequencies and crosstabulations of population characteristics across a variety of geographic levels. Consult with Census representatives to determine which files will meet your particular data needs. Many files for 1990 are available on CD-ROM as well as 9-track tape. Census data for 1980 are available on computer tape only. Prices can vary by file and according to the particular State for which information is desired. For example, prices for an STF3-A file for a single state on CD-ROM can vary from $50 to $200, depending on the size of the state.

Series STF-1 and STF-2 contain the basic demographic data asked of everyone in the census short form. STF-2 files are more detailed than STF-1. Each is available in several versions (labeled "A", "B", "C", and so on) which present identical data but for different geographic levels.

Series STF-3 and STF-4 present detailed frequencies and cross-tabulations of data from both the census short form, and the long form which is filled out by approximately 17 percent of all households. STF-4 contains more detailed estimates, but STF-3 files are adequate for the production of most child well-being indicators. Each is also available in several versions (labeled "A", "B", "C", and so on) which present identical data but for different geographic levels.

Much of the data contained in the STF series (1-4) are available online at the Census Bureau's Web site. The address for the site is http://www.census.gov. Visit the section marked "data access tools."

Custom Analyses

The Bureau of the Census has two programs for producing custom analyses of 1990 Census data: The User-Defined Areas Program (UDAG), and the Special Tabulations program. The UDAG will produce based on locally-specified geographic areas not available from existing census publications and data files. The Special Tabulations Program handles all other special tabulation requests. Both programs are run on a user-fee basis. The Census Bureau will provide free estimates of the cost and time required to produce desired tabulations. See below for contact persons for each of these programs.

Contact Persons

To order decennial census data or publications contact:

Census Data User Services
Bureau of the Census
Washington, D.C. 20233-8500
(301) 457-4100
(301) 457-4611 TDD

To inquire about custom analyses, contact:
Ms. Rose Cowan
Population Division
(301) 457-2408

For more information on state and county population estimates, call:
Michael Batutis, Jr. Chief
Population Estimates Branch
Population Division
Bureau of the Census
(301) 457-2380

For more information on plans for the 2000 Census:
Catherine Keeley
2000 Census Plans
(301) 457-4036

For more information on census online data services, call:

Microdata Access Branch
Administrative and Customer Services Division
U.S. Bureau of the Census
(301) 457-1242

For more information on the census population undercount, call:

Gregg Robinson
Population Analysis and Evaluation Staff
Population Division
Bureau of the Census
(301) 457-2103

For information on data related to children and families in the census, contact:

Martin O'Connell, Ph.D., Chief
Fertility and Family Statistics Branch
Population Division
U.S. Bureau of the Census
Suitland, MD 20233
(301) 457-2416

For more information on the American Communities Survey, call:

Larry McGinn, Chief
Continuous Measurement Office
Demographic Statistical Methods Division
U.S. Bureau of the Census
(301) 763-8328

For a more complete listing of telephone contacts, call the Data User Services Division at (301) 457-4100 and order "U.S. Bureau of the Census: Telephone Contacts for Data Users."

American Housing Survey (AHS)

Description

The American Housing Survey (AHS) is an ongoing survey of America's housing stock. The survey includes both a national sample and representative samples for 44 metropolitan areas across the country. Topics covered in the survey include housing costs, the physical condition of the unit, available equipment (e.g., heating and plumbing), neighborhood quality, tenure (i.e., renting versus owning), the identification of public housing, and basic income and demographic data for each member of the household.

Each metropolitan area had a sample size of approximately 4700 households in 1995, out of which one could expect about one quarter to include children under the age of 18. The national sample is considerably larger, but is not large enough to support estimates for individual states.

The survey is designed and funded by the Division of Housing and Demographic Analysis within the Department of Housing and Urban Development. The Bureau of the Census is responsible for collecting and tabulating the data.

Periodicity

The first national survey was fielded in 1973, and metropolitan surveys began in 1974. The national survey was originally fielded annually, but changed to a biennial schedule beginning in 1982. Each metropolitan area is surveyed approximately once every four years. The table in the following section provides actual survey dates for each metropolitan area included in the survey.

Geographic Coverage

The AHS includes representative surveys of over 40 metropolitan areas in the U.S. Each year between seven and twelve metropolitan areas are surveyed, and all metropolitan areas are covered approximately once every four years. The table below identifies each of the metropolitan areas in the survey, and the years in which surveys have been conducted or are planned.

Dates of AHS Metropolitan Surveys: 1974 to 1999

Area	1995 - 1999	1992 - 1994	1988 - 1991	1984 - 1987	1981 - 1983	1980	1977 - 1979	1974 - 1976
Albany-Schenectady-Troy, NY*						80	77	74
Allentown-Bethlehem-Easton, PA-NJ*						80	76	
Anaheim-Santa Ana, CA PMSA	94, 98	94	90	86	81		77	74
Atlanta, GA MSA*	96		91	87	82		78	75
Baltimore, MD MSA*	97		91	87	83		79	76
Birmingham, AL MSA*		92	88	84		80		76
Boston, MA-NH CMSA*	97	93	89	85	81		77	74
Buffalo, NY CMSA	94, 98	94	88	84			79	76
Charlotte, NC	95, 99							
Chicago, IL PMSA's*	95, 97, 99		91	87	83		79	75
Cincinnati, OH-KY-IN PMSA	99		90	86	82		78	75
Cleveland, OH PMSA	96	92	88	84			79	76
Colorado Spring, CO*							78	75
Columbus, OH MSA*	95, 99		91	87	82		78	75
Dallas, TX PMSA	94, 98	94	89	85	81		77	74
Denver, CO CMSA*	95, 99		90	86	83		79	76
Detroit, MI PMSA*	95, 97, 99	93	89	85	81		77	74
Fort Worth-Arlington, TX PMSA*	94, 98	94	89	85	81		77	74
Grand Rapids, MI*						80		76
Hartford, CT CMSA*	96		91	87	83		79	75
Honolulu, HI*					83		79	76
Houston, TX (new sample in 1987) PMSA's*	97		91	87	83		79	76
Indianapolis, IN MSA	96	92	88	84		80		76
Kansas City, MO-KS CMSA*	95, 99		90	86	82		78	75
Las Vegas, NV							79	76
Los Angeles-Long Beach, CA PMSA	95, 97, 99		89	85		80	77	74
Louisville, KY-IN*					83	80		76
Madison, WI*					81		77	75
Memphis, TN-AR-MS MSA*	96	92	88	84		80	77	74
Miami-Ft.. Lauderdale, FL CMSA*	95, 99		90	86	83		79	75
Milwaukee, WI PMSA	94, 98	94	88	84			79	75
Minneapolis-St. Paul, MN-WI MSA*	97	93	89	85	81		77	74
New Orleans, LA MSA*	95, 99		90	86	82		78	75
New York, NY PMSA's*	95, 97, 99		91	87	83	80		76
Newark, NJ (now covered by Northern NJ)	95, 97, 99				81		77	74
Norfolk-Virginia Beach-Newport News, VA MSA*		92	88	84			78	75
Northern NJ PMSA's*			91	87				
Oklahoma City, OK MSA*	97	92	88	84		80		76
Omaha, NE-IA*	96						79	76

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Dates of AHS Metropolitan Surveys: 1974 to 1999, continued

Area	1995 - 1999	1992 - 1994	1988 - 1991	1984 - 1987	1981 - 1983	1980	1977 - 1979	1974 - 1976
Orlando, FL*					81		77	74
Paterson-Clifton-Passaic, NJ (now covered by Northern NJ)					82		78	75
Philadelphia, PA-NJ PMSA	95, 97, 99		89	85	82		78	75
Phoenix, AZ MSA	94, 98	94	89	85	81		77	74
Pittsburgh, PA CMSA*	95, 99		90	86	81		77	74
Portland, OR-WA CMSA*	95, 99		90	86	83		79	75
Providence-Pawtucket-Warwick, RI-MA PMSA's*		92	88	84		80		76
Raleigh, NC*							79	76
Riverside-San Bernardino-Ontario, CA PMSA	94, 98	94	90	86	82		78	75
Rochester, NY MSA*	99		90	86	82		78	75
Sacramento, CA*	96				83	80		76
Saginaw, MI*						80	77	74
St. Louis, MO-IL CMSA*	96		91	87	83	80		76
Salt Lake City, UT MSA*	97	92	88	84		80	77	74
San Antonio, TX MSA*	95, 99		90	86	82		78	75
San Diego, CA MSA	94, 98	94	91	87	82		78	75
San Francisco-Oakland, CA PMSA	97	93	89	85	82		78	75
San Jose, CA PSMA*	97	93	88	84				
Seattle-Tacoma, WA CMSA*	96		91	87	83		79	76
Spokane, WA*					81		77	74
Springfield-Chicopee-Holyoke, MA-CT*							78	75
Tacoma, WA (now covered by Seattle-Tacoma)					81		77	74
Tampa-St. Petersburg, FL MSA*	97	93	89	85				
Washington, DC-MD-VA MSA*	97	93	89	85	81		77	74
Wichita, KS*					81		77	74

* Broader areas are surveyed after 1983. Each report has a map that defines the area surveyed that year.

Source: American Housing Survey for the United States in 1993. Current Housing Reports Series H150/93. Washington, D.C.: U.S. GPO, and unpublished tables.

Limitations

The boundaries of many of the metropolitan areas included in the survey were expanded after 1983. For this reason one should not compare data before and after the boundary changes for these metropolitan areas unless it is clear that the later estimates have been adjusted to refer to the old geographic boundaries. The affected areas are identified in the table above.

The AHS under-reports income and over-reports poverty when compared to estimates from other federal surveys such as the Current Population Surveys and the Survey of Income and Program Participation, which are considered to be more accurate. In addition, poverty in the AHS is calculated in terms of total household income rather than family income.

Indicators and Other Measures

Indicators of child well-being that can be constructed with data from the AHS include the following:

Percent of households containing children under age 18:
  in housing with moderate to severe physical problems.
  who report problems with crime in the neighborhood
  who live in public housing.
  living in crowded conditions (>1 person per room).
  who own their own homes.

Average rent/income ratio for renting households with children under age 18.

Construction of most of these indicators will require analyses of original survey data, as most are not included in the regularly published series for metropolitan areas.

Information on the residents in each household in the AHS includes the age, sex, race/ethnicity, marital status, educational attainment, earnings, and relationship to head of household for each individual, and household characteristics including the number of adults and children in each household, marital status of head of household, and income data by source. Separate estimates of housing or neighborhood quality can be produced for many sub-groups defined by these characteristics. In addition, one can track trends in these resident characteristics directly, though income data are under-reported compared to other sources that are considered to be more accurate and complete (see *Limitations* for more). The AHS represents the only source of such estimates between censuses for those metropolitan areas included in the survey.

Major Publications

A complete listing of reports based on data from the American Housing Survey is available from HUD User (see below under *Contact Persons*).

A list of available publications are available at the HUD User Website:
http://www.huduser.org

Separate reports are issued for each metropolitan area included in the metropolitan survey. Reports appear approximately 18 months after the data are collected. The report series is titled *Current Housing Reports, Series H-170.* Within that series, reports for individual metropolitan areas are titled *American Housing Survey for the (metro area name) Area.* National reports appear under *Current Housing Reports, Series H-150.*

Data Availability

Survey microdata for metropolitan areas are available on CD-ROM for surveys fielded since 1984, and on 9-track computer tape as far back as 1973. Data can be ordered from either HUD User or Census Data User Services (see below). Plans are underway to make the microdata available over the Internet. CD-ROMs are currently priced at $150 a piece. Each CD-ROM contains 3-4 years of surveys.

Full files or special extracts of AHS survey data can also be downloaded online by contacting:

Surveys On-Call
(301) 457-2341 (modem)
(301) 763-8375 (voice)

Custom Analyses

HUDUSER will, on request, supply a listing of private and public organizations who will produce custom data analyses for a fee (see listing under *Contact Persons*).

Contact Persons

For additional information, and to order publications, computer tapes or CD-ROMS:

HUD User
Box 6091
Rockville, MD 20850
(800) 245-2691
(301) 251-5154
(800) 877-8674 TDD

Census Data User Services
Bureau of the Census
Washington, D.C. 20233-8500
(301) 457-4100
(301) 457-4611 TDD

Members of Inter-University Consortium for Political and Social Research (ICPSR) can secure copies of the data free of charge:

ICPSR
(313) 763-5010

For substantive questions about the contents of the survey, call:

Mr. Paul Burke
Office of the Assistant Secretary for Policy Development and Research
Housing and Demographic Analyses Division
Department of Housing and Urban Development
Washington, D.C. 20410
(202) 708-9426 ext. 332

National Assessment of Educational Progress (NAEP)

Description

The National Assessment of Educational Progress (NAEP) is a biennial survey designed to monitor the knowledge, skills and performance of the nation's young people. NAEP was developed in 1969 and has included assessments in a variety of subjects. Since 1988, the sample of students assessed has been drawn from the universe of 4th, 8th, and 12th graders. In addition to the assessment tests, questionnaires are given to students, their teachers, and their schools.

Originally NAEP was designed to produce a representative sample at the national level. In 1986, the Secretary of Education created a study group to examine NAEP. The group published The Nation's Report Card which included a recommendation that NAEP should produce data that are also representative at the state level. In 1988, Congress passed legislation that authorized the collection of state-level data on a voluntary, trial basis. Representative state-level data were produced for the first time for participating states from the trial state assessment in 1990 for mathematics at the 8th-grade level.

The state assessments are designed to provide state-level estimates of student achievement in selected subject areas. The subjects and grade levels that have been assessed so far are: eighth grade mathematics in 1990; fourth grade reading and mathematics, and eighth grade mathematics in 1992; fourth grade reading in 1994; and fourth grade mathematics, and eighth grade science and mathematics in 1996. In 1998, assessments are planned for fourth grade reading and eighth grade reading and writing.

For each state a stratified random sample is generated. One-hundred public schools are selected from among all the public schools in the state. For those states with fewer than a hundred schools at that grade level all schools are included. Stratification is done by urban status, percent of African-American and Hispanic students when appropriate, and median household income. Substitutes for non-participating schools are selected from among schools that are similar to the original schools in terms of urban status, minority enrollment, median household income and total enrollment in the targeted grade. Approximately 30 students are selected for each school. The total number of students who were assessed exceeded 2,000 for each state and was over 2,500 for many states.

The development of assessment instruments is overseen by the National Assessment Governing Board (NAGB) which was created by Congress in 1988. The Governing Board includes teachers, curriculum specialists, state legislators, governors, measurement experts, chief state school officers, state and local school board members, school superintendents, principles and representatives from business. Through consultation with experts in subject, areas the Board develops assessment instruments and methodology.

Each student receives an assessment booklet containing a set of general background questions, subject-specific content questions, a set of subject-specific background questions, and a set of questions about his or her motivation and familiarity with the assessment materials. Students receive different sets of assessment questions based on a sampling procedure that results in few students in any single assessment session receiving the same booklet. In addition to the student booklet, questionnaires are given to teachers of students completing the assessment and to school administrators. All published statistics based on teacher or administrator survey information is presented in terms of the percent of students who have teachers (or administrators) with particular characteristics (e.g., the percent of students with science teachers who have formal training in the sciences).

Periodicity

The first NAEP test designed to provide state-level data was in 1990. Since then there have been state-level assessments in 1992, 1994, and 1996. As of now, there are plans to continue to conduct state-level tests in select subjects every 2 years.

Geographic Coverage

The first state-level assessment in 1990 involved 37 states, the District of Columbia, Guam and the Virgin Islands. The states not participating in 1990 were Alaska, Kansas, Maine, Massachusetts, Mississippi, Missouri, Nevada, South Carolina, South Dakota, Tennessee, Utah, Vermont, and Washington.

In 1992, 41 states, the District of Columbia, Guam and the Virgin Islands participated in the state-level assessment. Under the legislation authorizing the state-level assessments, a state or territory can review the results before giving permission to have them published. In 1992, the Virgin Islands declined permission to publish its results for the 4th grade assessments. The states not participating in 1992 were Alaska, Illinois, Kansas, Montana, Nevada, Oregon, South Dakota, Vermont and Washington.

In 1994, 41 states, the District of Columbia, and Guam participated in the trial state assessment in reading. The non-participating states were Alaska, Illinois, Kansas, Nevada, Oregon, South Dakota, Vermont, Washington, and Oklahoma. Idaho and Michigan did not meet minimum school participation requirements so their scores have not been reported in the NAEP 1994 Reading: Report Card. Washington, D.C. declined to publish its results. In 1996, 44 states, the District of Columbia, and Guam participated in the state assessments in mathematics and science.

Limitations

In 1990 and 1992, state-level data are for public school students only. Private schools are included in the 1994 reading assessment. When comparing state data to national data in 1990 and 1992, users should be sure to use national data that excludes private school students.

Comparisons between groups are limited in some states by sample size. Information about minority groups, and other sub-groups is sometimes limited because of small sample size. This is especially a problem in states with small minority populations. When examining NAEP data, users should pay careful attention to cautions about data based on small samples.

The small number of assessments at the state-level limit conclusions about trends over time. It will not be until the 1996 data become available that there will be three sets of assessments in a particular subject and grade level (8th grade mathematics) that can be compared. In addition, not all states have participated in the assessments and some have only participated in a select number of the tests.

While participation rates are generally high, there are some states that did not fully meet standards established by the NCES. Data are reported for these states, but a warning about bias from nonresponses is included in publications and tables. Caution should be used, especially for those states that fail to meet multiple standards for participation rates.

Caution should be used when comparing states. NAEP publications recommend constructing confidence intervals around indicators. Descriptions on how to do so are provided in many NAEP publications.

Indicators and Other Measures

Assessment Scores in:
  4th grade math 1996;
  8th grade math 1990, 1992, 1996;
  4th grade reading 1992, 1994, 1998 (planned);
  8th grade reading and writing 1998 (planned);
  8th grade science 1996

Assessment scores are on a scale of 0 to 500. For each subject there is an explanation of what achievement at a certain level means. The levels that include a description are from 150-350. The meaning of the scores are described in publications on the subject tests and in The Condition of Education. NAGB has also begun to set achievement levels at each grade level. In each subject a level is set which indicates a student is achieving at the basic, proficient, or advanced level for that grade. The achievement level methodology is still being developed and its use is somewhat controversial. The 1992 reading achievement levels were revised after problems became apparent during the compiling of the 1994 data. Thus caution should be used when reporting data about achievement levels.

Percent of 8th graders taking algebra, pre-algebra, and regular math

Students report on the amount of time spent watching television each day (0-2 hours, 3-5 hours, 6 or more). Can be used to construct an indicator on percent of children watching excessive amounts of television each day.

Number of hours of homework each day

Students' reports on days absent from school during the last month. Can be used to construct an indicator on percent of students with excess absences. For example, excess can be defined as students with 3 or more absences in one month.

Students' reports of types of reading material in the home (newspaper, encyclopedia, magazines, books)

Students' reports on number of pages read each day for school and homework (5 or fewer, 6 to 10, 11 to 15, 16 to 20, more than 20)

Students' reports on frequency of reading for fun (daily, weekly, monthly, yearly, never)

Teachers' reports on the availability of computers for student use

Teachers' reports on the availability of instructional resources

Data can be broken down by race and ethnicity. The racial/ethnic groups are whites, blacks, Hispanics, Asian/Pacific Islander, American Indians. Very few states have enough Asian/Pacific Islander or American Indian students to provide usable estimates. Data can also be broken down by sex, parent's highest level of education, and by type of community (advantaged urban, disadvantaged urban, extreme rural, and other).

Data are also provided on scores in particular content areas for mathematics. The content areas are: numbers and operations; measurement; geometry; data analysis, statistics, and probability; algebra and functions; and, in 1992 only, estimation.

Major Publications

The State of Mathematics Achievement: NAEP's 1990 Assessment of the Nation and the Trial Assessment of the States. National Center for Education Statistics. U.S. Department of Education.

NAEP 1992 Mathematics Report Card for the Nation and the States: Data from the National and Trial State Assessments. National Center for Education Statistics. U.S. Department of Education.

NAEP 1992 Reading Report Card for the Nation and the States: Data from the National and Trial State Assessments. National Center for Education Statistics. U.S. Department of Education.

NAEP 1994 Reading Report Card for the Nation and the States: Data from the National and Trial State Assessments. National Center for Education Statistics. U.S. Department of Education.

State Indicators of Science and Mathematics Education 1995: State-by-State Trends and New Indicators from the 1993-94 School Year. Council of Chief State Officers. State Education Assessment Center. Includes NAEP data reported in the Department of Education publications along with data from other sources.

Data Availability

Data can be ordered from the Education Information Branch listed under contact persons.

Data from the trial state assessments of NAEP are available on 9-track tape, tape cartridge, or diskette for personal computers. The cost is $175 per tape or $75 per diskette.

1992 data are available free of charge on CD-ROM. The titles of the CD-ROMs are:

NAEP Data on Disk: 1992 Almanac Viewer. National Center for Education Statistics, U.S. Department of Education.

Data Almanac: NAEP's 1992 Assessment in Reading. National Center for Education Statistics, U.S. Department of Education.

Both CD's include sets of summary data based on responses to background and attitude items from the student, teacher, and school questionnaires. The results presented include mean proficiency values for each response alternative. The results are enumerated for important demographic groups such as student gender, race/ethnicity, parental education, and type of community. While there is a considerable amount of data presented, it is impossible to use the CD-ROMs to produce additional tables.

The 1992 Almanac viewer can be downloaded from the NCES gopher site. The address for the gopher site is gopher://gopher.ed.gov:10000/11/tab/assess/naep. Other information about NAEP is currently available at this site. Additional information can be accessed through the Department of Education's World Wide Web site. The address is: http://www.ed.gov/

Custom Analyses

At the current time the Department of Education does not offer special tabulations and analyses for NAEP.

Contact Persons

To order NAEP publications or data on tapes or disk contact:

National Data Resource Center
(703) 845-3151
or you can fax
Beth Schlaline
National Data Resource Center
(703) 820-7465

Questions about NAEP can be directed to:

Gary W. Phillips
Associate Commissioner
Education Assessment Division
National Center for Education Statistics
555 New Jersey Avenue NW
Washington, DC 20208-5653
Telephone Number (202) 219-1761

Common Core of Data (CCD)

Description

The Common Core of Data (CCD) is the National Center for Education Statistics' (NCES) primary database on elementary and secondary public education in the United States. The CCD provides basic information and descriptive statistics on public elementary and secondary schools and schooling. In addition, the CCD is intended to provide a list of all public elementary and secondary schools and school districts in the nation, which can be used to select samples for other NCES surveys.

The CCD includes data about all public elementary and secondary schools, all local education agencies, and all state education agencies throughout the United States. The CCD is made up of five surveys sent to state education departments: school surveys; LEA (Local Education Agency or school district); State Nonfiscal; State Fiscal; and Early Estimates. Most of the data are obtained from administrative records maintained by state education agencies. The state agencies compile data received from schools and school districts for the NCES. Data are provided for states, local education agencies, and individual schools.

School finance data are collected through a combined survey with the Census Bureau. Finance data for all LEA's are collected in fiscal years ending in 2 and 7. For all other years, except 1990 (when data was collected from all LEA's), a sample of districts have been selected. This sample contains about 60 percent of all districts.

Periodicity

Data are collected on an annual basis.

Geographic Coverage

For many measures, data are available for the 50 states, the District of Columbia, five "outlying areas" (American Samoa, Guam, Northern Marianas, Puerto Rico, and the U.S. Virgin Islands), all school districts, and individual schools (only limited data are available at the school level). Dropout data began to be collected through the CCD in 1991-92, and are only provided for those states that meet NCES definition and reporting standards. In 1991-92, 14 states and the District of Columbia met these standards. The number of states meeting standards increased to 18 for the 1993-94 school year. The 18 states for 1993-94 are: Arizona, Arkansas, California, Connecticut, Delaware, Kansas, Massachusetts, Mississippi, Missouri, Nebraska, Nevada, New Mexico, New York, North Dakota, Oregon, Pennsylvania, Rhode Island, Texas.

Limitations

The survey does not cover private schools. The rate of private school attendance varies, reaching in excess of 10 percent of the school-age population in some states. Shifts in the characteristics of the school population may reflect in part a shift towards (or away from) private school attendance, rather than a shift in the characteristics of the school-age population in general.

While the CCD attempts to get states to provide data using consistent definitions, the statistics reported are still subject to error, and the quality of reported data collected may differ by school, district, and state.

Indicators and Other Measures

Student-teacher ratio

Percent high school dropouts -- Students who dropped out in grade 9-12 over total enrollment for grades 9 - 12. Dropout data are available for grades 7-12, but it is recommended that the dropout rates be reported for high school students only. These data represent individuals who failed to enroll at the beginning of the previous school year (summer dropouts or "no shows") and individuals who were enrolled in school at some time during the previous school year, but were not enrolled at the beginning of the current school year and have not graduated from high school. Not available at the school level.

Percent high school dropouts by racial group -- Computed at the state level, needs to be computed at the district level by using total high school dropouts of each group/number of students in each group + number of dropouts in group.

The following indicators can be constructed using the variables listed here:

Expenditures per pupil = Total LEA expenditure/number of students in LEA

Student/guidance counselor ratio = Number of school guidance counselors in LEA/number of students in LEA

Student/librarian ratio = Number of school librarians in LEA/number of students in LEA
Percent of students receiving equivalency degrees = Students receiving equivalency degrees / (students receiving regular diplomas + students receiving equivalency degrees + students receiving other degrees). This indicator can only be computed at the state level because equivalency degree data are only collected at the state level.

Percent of high school graduates receiving regular diplomas = Students receiving regular diplomas / (students receiving regular diplomas + students receiving equivalency degrees + students receiving other degrees). This indicator can only be computed at the state level because equivalency degree data is only collected at the state level.

Among the CCD variables in this data set is a count of "free-lunch eligible students" at the school level, but measurement problems make it a poor candidate for an indicator. We advise against using this measure.

The *NCES CCD 92 Disc* includes 1990 Census data as well as CCD-based school data for all school districts in the country. This unique data source allows one to place school data within the context of important general population characteristics such as the rate of poverty and percent of families that are female-headed. It was produced as a joint project of the Bureau of the Census and the NCES. The Census population variables include: household median income; median value of housing units, percent of males and females living below poverty; median income of households with children; percent of male and female children living in households with income below the poverty level; percent of all, Asian, Hispanic, and other race students who speak English very well, well, and not well; percent of persons in the district age 25 and over who have less than a high school diploma, who are high school graduates, who have some college, who have a bachelor's degree or higher.

Other population data include the number and percent of students by their racial/ethnic group. Data are provided for American Indians, Asians, blacks, Hispanics, and whites Data on the breakdown of students by racial/ethnic group are also broken down by grade. Breakdowns for dropout data are provided by race, ethnicity, and sex. Students receiving diplomas and equivalency degrees are broken down by race/ethnicity.

Major Publications

State-level data from the Common Core of Data are reported in the annual summary volumes of the NCES, The Condition of Education and Digest of Education Statistics. Data are also frequently reported in the NCES's Statistics in Brief reports.

Each year NCES publishes a LEA Directory. This is a listing of every LEA or school district in the U.S., Washington, D.C., and outlying areas. The information includes an address, phone number, grade span, student count, HS graduates, count of students in special education programs, number of teachers, and number of schools. Additional information is given on the 100 largest school districts including a more detailed breakdown of race/ethnic data, counts of school and students by school types, enrollment distribution, and revenue and expenditures.

NCES does not routinely publish data below the state level from this data source. Data are made available at the school district level, however, on CD-ROM, computer tape, PC diskettes, and over the World Wide Web (see below for details).

Data Availability

Data for the 1987-88 through 1992-93 school year are available on a single CD-ROM titled the Common Core of Data (CCD) School Years 1987-88 through 1992-93. This CD-ROM also includes some school district level data from the 1990 Census. The CD includes software for constructing tables. Data can be extracted for use with other statistical analysis packages such as SPSS and SAS. The Department of Education hopes to include Census data with district level CCD releases in the future but these plans are subject to budgetary restrictions. The cost of the CD-ROM is $14.00.

Annual data are available on 9-track tapes, tape cartridge, or diskette for personal computers. Tapes and diskettes are organized by agency (state and local) and schools. The cost is $175 per tape or $75 per diskette. The data for the 1992-93 school year were released in February of 1995. Tapes for the 1993-94 school year are currently scheduled for release in early-1996.

The Department of Education has made some CCD data available on the World Wide Web and has plans to make more available. Currently, data files can be downloaded for school-level data for the 1986-87 through 1990-91 school years. In addition, the NCES has made early release data available for schools and agencies for the 1993-94 school year. Early release data have not been edited and are subject to revision so we do not recommend its use for indicator construction. At the current time NCES data can be accessed at the Department of Education gopher site. The address is: **gopher://gopher.ed.gov:10000**. The NCES is in the process of developing a World Wide Web home page that will enable access to the CCD and other NCES data. The new home page will be the site of new additions to the NCES' available on-line data. Access to the NCES home page will be available through links to the Department of Education's home page which is located at: **http://www.ed.gov**.

Custom Analyses

State education personnel, education researchers, and others can obtain free tabulations of CCD data from the National Data Resource Center. The Data Center develops its own tables, graphics and analyses in anticipation of the needs of policy makers, researchers, and others. In addition, the Data Center will perform requested tabulations. For further information contact:

Carl Schmitt
Elementary and Secondary Education Statistics Division
National Center for Education Statistics
555 New Jersey Avenue NW
Washington, DC 20208-5651
(202) 219-1641

Contact Persons

To order CCD publications or data contact:

National Data Resource Center
(703) 845-3151
or fax
Beth Schlaline
National Data Resource Center
(703) 820-7465

Questions about CCD state-level data can also be directed to:

Frank Johnson
Elementary and Secondary Education Statistics Division
National Center for Education Statistics
555 New Jersey Avenue NW
Washington, DC 20208-5651
Telephone number (202) 219-1618

Questions about CCD school district data and school-level data should be directed to:

John Sietsema
Elementary and Secondary Education Statistics Division
National Center for Education Statistics
555 New Jersey Avenue NW
Washington, DC 20208-5651
Telephone number (202) 219-1921

Schools and Staffing Survey (SASS)

Description

The Schools and Staffing Survey (SASS) is designed to provide information on the nation's elementary and secondary teaching force, aspects of teacher supply and demand, teacher workplace conditions, characteristics of school administrators, and school policies and practices. The SASS was first conducted in 1987-88.

The SASS consists of four separate surveys. These surveys are the Teacher Demand and Shortage Survey, the School Administrator Survey, the School Survey, and the Teacher Survey.

The SASS system of surveys uses a set of linked samples. A sample of public and private schools is selected; the same sample is used for the School Administrator Survey. Each public school district that administers one or more of the sample schools in the public sector becomes part of the sample for the Teacher Demand and Shortage Survey. For each sample school, a list of teachers is obtained and a sample is selected for inclusion in the Teacher Survey.

The sample size for 1987-88 and 1993-94 was approximately 9,300 public schools and 52,200 public school teachers. In 1990-91, the public school sample consisted of 9,586 schools and 56,051 teachers. In addition, a private school sample is selected. The private school sample does not allow for state estimates, but it can be used to get estimates for the four census regions (northeast, midwest, south, and west). The sampling strategy also involves selecting public schools that allow a national estimate for schools with greater than 25 percent American Indian student enrollment. Since the American Indian sample does not allow for state estimates it will not be discussed here, but these data may be useful for states which have substantial American Indian populations.

The Teacher Demand and Shortage Survey is sent to the school districts that govern the schools selected for the sample. The questionnaire has two sections, enrollment and teaching positions, and district policies. The first section, on enrollment and teaching positions, obtains information on the number of students, number of teachers and librarians, position vacancies, new hires and certification status. The second section, on district policies, obtains information on teacher salaries and benefits incentives, hiring and retirement policies, and high school graduation requirements. Race/ethnic data on the student population and the teacher work force are also collected.

Questionnaires for the School Administrator Survey were sent to principals in public and private schools. The questionnaire obtains information about the age, sex, race/ethnicity, training, experience, salary, benefits, opinions and attitudes of school principals/heads. The data derived from this survey provide an insight into qualifications of school administrators, which problems school administrators view as serious, and how administrators perceive their influence on school policies.

Questionnaires for the School Survey were sent to both public schools and private schools. This survey obtained information about schools such as student characteristics, staffing patterns, types of programs and services offered, length of school day and school year, graduation and college application rates, and teacher turnover rates.

Questionnaires for the Teacher Survey were sent to teachers in public and private schools. The survey collected data from teachers regarding their education and training, teaching assignment, teaching experience, certification, teaching workload, perceptions and attitudes about teaching, job mobility, and workplace conditions.

The 1990-91 and 1993-94 samples are designed to provide separate estimates for elementary schools, secondary schools and schools with combined elementary and secondary schools. The 1987-88 sample was not designed to produce separate estimates for schools with different grade levels. A sample of teachers is drawn from the selected schools. Data are collected through a mail survey with a telephone follow-up to non-respondents.

Current plans call for SASS to be conducted every 5 years, with the next one planned for the 1998-1999 school year.

Periodicity

1987-88, 1990-91, 1993-94, 1998-99 (planned)

Geographic Coverage

All 50 states and the District of Columbia

Limitations

State-level data are not available for private schools. The sample size limits the degree to which indicators can be used to examine the experience of sub-groups, for example minorities or urban schools.

Indicators and Other Measures

Percent of public elementary and secondary schools and students participating in free or reduced price lunch programs.

Percent of students receiving Chapter 1 or Title 1 services (services provided for disadvantaged students).

Average class sizes

Percent of classes with 30 or more students

Schools with after-school programs

Percent of 10-12th grade students in college preparatory courses

Percent of 12th graders applying to college

Percent of teachers and percent of principals who view the following as serious problems:
  tardiness;
  absenteeism;
  physical conflicts among students;
  robbery or theft;
  vandalism;
  student pregnancy;
  student alcohol or drug use;
  student weapon possession;
  physical abuse of teachers;
  verbal abuse of teachers;
  student disrespect for teachers;
  dropping out;
  student apathy;
  lack of academic challenge;
  lack of parental involvement;

parental alcohol or drug abuse;
poverty;
racial tension;
cultural conflicts.

Percent of schools with less than 1% minority teachers

Percent of teachers who are newly hired

Percent of teachers with 1-2 years experience

Percent of teachers with more than 20 years of experience

The following are not available for the 1987-88 survey but are available in more recent surveys:

Percent of high school science teachers who majored in science or science education

Percent of high school math teachers who majored in math or math education

Percent of high school English teachers who majored in English or English education

Percent of high school social studies teachers who majored in social studies or social studies education

Percentage of elementary school teachers with a major in pre-elementary or elementary education

Data are available for the percent of minority students, teachers, and principals. Racial/ethnic groupings are white, black, Hispanic, Asian, and American Indian. Data can be broken down by community type. The community type classifications are central city, urban fringe/large town, small town, and rural. Data are also available on average school size.

Major Publications

SASS by State: 1990-91 Schools and Staffing Survey: Selected State Results. Rolf Blank, Michael Matti, Iris Weiss, Stephen Broughman, and Mary Rollefson. National Center for Education Statistics. U.S. Department of Education. June 1994.

NOTE: This is the most useful and comprehensive of published sources that includes state data from SASS. There will be a similar book for the 1993-94 data with an expected publication date of July 1996.

1990-91 Schools and Staffing Survey: Data File User's Manual Volume I: Survey Documentation (NCES 93-144-I)

1990-91 Schools and Staffing Survey: Data File User's Manual Volume III: Public-Use codebook (NCES 93-144-III)

Note: Volume II is the documentation for the restricted use data set. Identification elements on these public-use files are coded or deleted to protect the confidentiality of survey participants. School, administrator, and teacher files may be linked within SASS but individual level data such as specific salary or race are not on the public-use file. The restricted use file is available for researchers who can demonstrate they need the information, but the public use data set should suffice for those interested in indicators of child well-being.

Data Availability

The 1987-88, 1990-91, and 1993-94 data are available free of charge on CD-ROM while supplies last. When the Department of Education runs out of copies they will still be available for purchase through the Government Printing Office (202) 512-1806.

Schools and Staffing Survey: 1993-94 Electronic Codebook and Public Use Data. Office of Educational Research and Improvement. U.S. Department of Education.

Schools and Staffing Survey: 1990-91 Electronic Codebook and Public Use Data. Office of Educational Research and Improvement. U.S. Department of Education.

Schools and Staffing Survey, 1987-88 Microdata and Documentation. Office of Educational Research and Improvement. U.S. Department of Education.

If you do not have regular access to a CD-ROM, you may still be able to use the free CD-ROMs. Data files can be copied from the CD-ROM to personal computers or diskettes. For those who do not have any access to a CD-ROM data files for the 1987-88 and 1990-91 SASS are available on 9 track tapes, tape cartridge, or diskette for personal computers. The cost is $75 per diskette, for tapes the cost is $175 for one survey and $75 for any additional surveys ordered. Contact the Education Information Branch listed below. Separate files exist for each of the four questionnaires: the school district (i.e., teacher demand and shortage data), the school administrator (i.e., principal), the school questionnaires, and the teacher questionnaires.

On-line information about SASS can be accessed through the Department of Education's World Wide Web site. The address is: http://www.ed.gov/

Custom Analyses

State education personnel, education researchers, and others can obtain free tabulations of SASS data from the National Data Resource Center. The Data Center develops its own tables, graphics and analyses in anticipation of the needs of policy makers, researchers, and others. In addition, the Data Center will perform requested custom tabulations. For further information contact:

Carl Schmitt
Elementary and Secondary Education Statistics Division
National Center for Education Statistics
555 New Jersey Avenue NW
Washington, DC 20208-5651
(202) 219-1641

Contact Persons

To order SASS publications or request data contact:

National Data Resource Center
(703) 845-3151
or fax
Beth Schlaline
National Data Resource Center
(703) 820-7465

Questions about survey content and future plans for SASS can be directed to:

Dan Kasprzyk
Elementary and Secondary Education Statistics Division
National Center for Education Statistics
555 New Jersey Avenue NW
Washington, DC 20208-5651
Telephone Number (202) 219-1588

Vital Statistics System

Description

The Vital Statistics System collects data on birth, death, fetal death, marriage, and divorce. These vital statistics are provided through state-operated registration systems. However, standard forms and model procedures are developed and recommended for state use through cooperation between the National Center for Health Statistics (NCHS) and state officials. Data are collected from birth certificates, death certificates, marriage licenses and certificates of divorce.

Periodicity

Data are collected monthly from most states, but the vast majority of the statistics are reported on an annual basis.

Geographic Coverage

For birth and death statistics, coverage extends to: all 50 States and the District of Columbia; all counties; all cities over 10,000; all unincorporated towns and townships in New England, New York, Wisconsin, Michigan, New Jersey, and Pennsylvania that have a population of 25,000 or more; and unincorporated towns and townships in New England, New York, Wisconsin, Michigan, New Jersey, and Pennsylvania with a population of at least 10,000 and a density of 1,000 persons or more per square mile.

Variations in the quality and quantity of data from the marriage and divorce reporting systems varies across states significantly more than data from the birth and death reporting systems. The most comprehensive reporting occurs in those states that are part of the marriage-registration area (MRA) and the Divorce-Registration-Area (DRA). In order to be part of these registration areas states must meet reporting and comparability standards. Data from states outside the MRA and DRA may be subject to greater error.

The MRA extends to the District of Columbia and a number of states that has varied from 39 in 1968 to 42 in 1990. The participating states in 1990 included all states except: Washington, Nevada, Arizona, New Mexico, Texas, Oklahoma, Arkansas, and North Dakota. Data for states not in the MRA are limited to counts of marriages by county and state.

DRA coverage has gone from 26 states in 1968 to 31 states and the District of Columbia in 1990. Not all states report data for all statistics. The states participating in the DRA in the 1990 were: Alabama, Alaska, Connecticut, Delaware, Georgia, Hawaii, Idaho, Illinois, Iowa, Kansas, Kentucky, Maryland, Massachusetts, Michigan, Missouri, Montana, Nebraska, New Hampshire, New York, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Vermont, Virginia, Wisconsin, and Wyoming.

Limitations

County and city data may not be stable due to rare event problems. When rates and percentages are calculated using small numerators or denominators, minor changes in the incidence of an event can look misleadingly large when translated into a rate or percentage. The Vital Statistics system does not calculate rates or percentages if either the numerator or denominator are less than 20. One may still be able to produce annual estimates based on low annual incidences by combining a number of contiguous years of data and taking an average. For example, if there is a county with a small number of violent youth deaths, one could sum the deaths over 3 or 5 years and take an average in order to calculate an annual average rate or percentage.

Birth Data

The marital status of women giving birth is not reported on birth certificates in every state. In 1993, there were 6 states (California, Connecticut, Michigan, Nevada, New York, and Texas) that did not include marital status. In these states marital status is inferred from a comparison of the child and parent's surnames. A birth in a nonreporting state is classified as occurring to a married women if the parents' surnames are the same, or if the child's and father's surnames are the same and the mother's current surname cannot be obtained from the informant item of the birth certificate. A birth is classified as occurring to an unmarried woman if the father's name is missing, if the parents' surnames are different, or if the father's and child's surnames are different and the mother's current surname is missing. This method may overestimate the number of non-marital births because it counts as unmarried, women who have retained their surname after marriage. Studies have suggested that the impact is unlikely to be very large. However, the number of births to unmarried in Texas is definitely under-reported since 1989. Legislation was passed in Texas that resulted in counting a birth as being to a married women whenever the mother provided any information about the father, or when a paternity affidavit had been filed. This legislation has resulted in incomplete data that we recommend should not be used. The measurement of marital status for Texas births is expected to improve starting with the 1994 data because a question on marital status has been added to the birth certificate.

Self-reports of drinking and smoking by mothers as reported on the birth certificate may be underestimates because of an unwillingness to report such behavior to medical authorities. However, smoking levels based on birth certificate data are comparable to those based on other sources.

Beginning with the 1989 data year, NCHS changed the method of tabulating live birth and fetal death data by race from race of child to race of mother. This results in infant, fetal, and perinatal mortality rates for 1989 and after that are not comparable with those published for previous years. The NCHS did publish data for 1989 and 1990 using both methods. Recently NCHS retabulated rates for 1980-88 by race of mothers. Rates for 1980 are shown by race of mother and race of child to facilitate continuity and analysis of the data.

Death Data

On death certificates, a funeral director often fills out the race of the deceased. Asian and Native Americans are sometimes mis-identified as white, resulting in death rates that are under-estimated by 22-30 percent for Native Americans, and by about 12 percent for Asian Americans.[10] Death rates for whites and blacks are believed to be substantially accurate. Those interested in estimating infant or child death rates for these populations should contact the Mortality Statistics Branch of the National Center for Health Statistics for advice on how to correct for these under-estimates (see below).

Hispanic-origin data were first collected in 1984. Not all states included the item at that time. By 1993, all states except for Oklahoma had begun to report Hispanic origin. There have been frequent and diverse problems in the reporting of Hispanic-origin data on death certificates. For example, the 1990 and 1991 data for New York City include a substantial number of death certificates that did not report on whether a person was of Hispanic-origin. The National Center for Health Statistics (NCHS) excluded data on Hispanic-origin for New York City and since New York accounts for about half of the deaths to Puerto Ricans, the resulting data is unlikely to be comparable to previous years. In earlier years, a substantial portion of the Cuban-American population lived in states that had not reported Hispanic-origin data. If you are going to report mortality data by Hispanic origin you should check the "Technical Appendix" in the *Vital Statistics of the United States, Volume II* or the "Technical Notes" in the "Advance Report of Final Mortality Statistics" published in the *Monthly Vital Statistics Report*.

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[10] Sorlie, P.D., Rogot, E., Johnson, N.J. 1992. "Validity of demographic characteristics on the death certificate." *Epidemiology* 3(2): 181-184.

Marriage and Divorce Data

Marriage and divorce data are much less comprehensive and consistent than the birth or death data. Only some states are part of the MRA and DRA (described above) and not all of these report data on all the statistics collected in the reporting systems. Data on the number of children involved in divorce exist only for those states participating in the DRA. However, a national estimate of the number and rate of children involved in divorce is computed.

Beginning with the 1996 data year, the amount of marriage and divorce data collected and reported at the national level will be limited to counts of marriages and divorces. The federal government will continue to report the number of marriages and divorces by state, but the plan is to discontinue more detailed reports that include family characteristics such as the presence of children. Some of these data are likely to continue to be available at the state-level. It is recommended that you contact state offices in charge of this data to find out what is available.

Indicators

Natality Data
- Number of births (also by race/ethnicity)
- Fertility rate (per 1,000 women aged 15-44)*
- Percent of births to unmarried mothers (under age 15, age 15, 16, 17, 18, 19, 20-24 years, 25-29 years, 30-34 years, 35-39 years, age 40 and over).*
- Percent births to teenagers that are second births
- Percent of births to mothers who drank during pregnancy
- Percent of births to mothers who smoked during pregnancy
- Percent of births with selected abnormal conditions (anemia, birth injury, fetal alcohol syndrome, Hyaline membrane disease/RDS, meconium aspiration syndrome, assisted ventilation less than 30 minutes, assisted ventilation 30 minutes or longer, seizures).

One can use data on the month prenatal care began to compute the percent of mothers receiving early prenatal care (within the first three months) and percent receiving late or no prenatal care (defined as starting care in the 7th-9th month or receiving no care)

Mortality Data
- Infant mortality rate (per 1,000 live births)
- Child Mortality Rate by Age (rate per 100,000 in Age Group)
- Deaths from motor vehicle accidents
- Violent deaths (suicide, homicide)

Marriage and Divorce

Estimated number of children involved in divorce (will not be available through the federal statistical system after 1995).

Indicators marked with a "*" require that population estimates be available for the relevant group at the geographic level of interest. For Census years this is usually not an issue because detailed population counts exist for numerous subgroups. For years between censuses population estimates are available by age at the state level. Estimates are also available at the county level for total population, and by 5 year age groups, race, and sex. Information on who to contact to obtain population estimates is in Appendix A.

Major Publications

The NCHS publishes advance statistics on births, marriages, divorces, and deaths in *Monthly Vital Statistics Report*. This publication is available free of charge from the NCHS. To receive the monthly reports call (301) 436-8500. You can request previous reports and ask to be put on a mailing list for future reports.

Statistics are reported in different volumes of the *Monthly Vital Statistics Report*. Lags between collection and publication vary by year. The "Advance Report of Final Natality Statistics" is published approximately 2 years following the year in which it is collected (the 1993 data was published in 1995). The "Advance Report of Final Mortality Statistics" is published 2 to 3 years after collection. Separate advance reports for marriage and divorce have been published through 1990. Thus the reporting interval for marriage and divorce has been running considerably longer than the interval for births and deaths.

Final data are reported in a three volume series *Vital Statistics of the United States*; Volume I covers Natality; Volume II covers Mortality; and Volume III covers Marriage and Divorce. The 1991 Natality and Mortality Volumes have been printed. The current cost is $43 for the Natality volume, the Mortality volumes consist of two parts with Part A costing $46 and Part B costing $49. The Marriage and Divorce volume has not been published but should be priced in the $20-$30 range. These volumes are also available at government depository libraries.

There is a lag of at least one year, and often considerably longer, between the publication of the Advance Report and the final Vital Statistics Volume. While the final version offers more detailed data and has been subject to more thorough editing, Advance Report data are useful to obtain because of their relative timeliness.

In addition to the main summary reports, the NCHS produces a considerable number of special reports that often contain detailed data and useful information. For example, in June 1995, the NCHS published a volume by Stephanie Ventura titled, "Births to Unmarried Mothers: United States. 1980-92," which included data on trends in births to unmarried mothers by state, race, and age. This publication and numerous others are available for a small charge from the Government Printing Office. A catalog of NCHS publications is available by calling (301) 436-8500.

Many NCHS publications are also available on the World Wide Web. The address for the NCHS home page is: *http://www.cdc.gov/nchshome.htm*. The publications on the NCHS web site are free, including some that require a payment if ordered through the mail. In order to read or print publications obtained from the NCHS web site, you must use a program called the Acrobat Reader. Easy instructions for downloading and installing Acrobat are available on the NCHS Home Page.

Data Accessibility

Vital Statistics data are available on 9-track tapes. Data are also available on diskette in ASCII format or formatted in one of the major data-base programs. The large size and complexity of these data sets present considerable obstacles to easy analysis. Data from the Vital Statistics System are also quite expensive. Currently detailed natality data for 1993 are available for $1,620, detailed marriage data for 1990 are available for $240, detailed divorce data for 1990 are available for $240, linked birth and infant death data for 1991 is $1,300, and detailed mortality data for 1992 are available for $1,200. Data products are ordered from the National Technical Information Service (NTIS). The cost, complexity, and availability of published sources argue against the purchase of Vital Statistics data. The NCHS does not make computer record data from individual states available for purchase. You may want to check with the office in charge of Vital Statistic collection for your state. Some states may have data available sooner than the federal government and at a lower cost. A list of contacts in the State Vital Statistics Offices is in Appendix D.

Custom Analyses

During the lag between the issuing of advance reports of data in the *Monthly Vital Statistics Report* and the final publication of the *Vital Statistics of the United States* volumes, the NCHS will respond to requests for unpublished data whenever this is possible. This may enable you to obtain data with greater geographic specificity or with more detail. Contact the person listed for the subject area you are interested in for further information.

You may also wish to check with state offices in charge of Vital Statistics for more timely data and for data that the NCHS is unable to provide at the level of geographic specificity you require.

Contacts

To order a catalog of Vital Statistics publications and data tapes, as well as the free publications available directly from the NCHS, contact the National Center for Health Statistics by calling (301) 436-8500.

To order copies of the final comprehensive *Vital Statistics of the United States* volumes and other NCHS publications available for purchase contact:

Superintendent of Documents
U.S. Government Printing Office
Washington, D.C. 20402-9325

To order tapes or diskettes with Vital Statistics data contact:

NTIS
5285 Port Royal Road
Springfield VA 22161
(703) 487-5650
(703) 321-8547 (fax)

For additional information on mortality statistics contact:

Harry M. Rosenberg
Mortality Statistics Branch
Division of Vital Statistics
National Center for Health Statistics
Centers for Disease Control and Prevention
6525 Belcrest Road, Room 840
Hyattsvile, Maryland 20782
(301) 436-8884

For additional information on natality, marriage, and divorce statistics contact:

Robert Heuser or Stephanie Ventura
Natality, Marriage, and Divorce Statistics Branch
Division of Vital Statistics
National Center for Health Statistics
Centers for Disease Control and Prevention
6525 Belcrest Road, Room 840
Hyattsvile, Maryland 20782
(301) 436-8954

Appendix D lists contacts in the State Vital Statistics Offices.

Youth Risk Behavior Surveillance System (YRBSS)

Description

The Youth Risk Behavior Surveillance System (YRBSS) is a survey designed to monitor six categories of health risk behaviors among adolescents in grades 9 through 12: behaviors contributing to intentional and unintentional injuries; tobacco use, alcohol and other drug use, sexual behavior, dietary behaviors, and physical activity. The survey was developed by the Division of Adolescent and School Health, Centers for Disease Control and Prevention (DASH/CDC).

Items to be included in the survey were identified by a team of national experts on adolescent health with input from representatives from all 50 state education agencies and 16 of the nation's largest local departments of education. They include questions reflecting national goals for adolescent health as identified in Healthy People 2000.

The surveillance system includes a national survey and separate surveys by the departments of education of participating states and cities. Each participating state and city fields its own survey with technical assistance from DASH/CDC. They are all school-based surveys using self-administered questionnaires that are filled out during a class period.

The national survey is based on a representative sample of all students in grades 9 through 12 in the United States. Participating states and cities also attempt to draw samples that are representative of their student populations, though in some years certain states and localities fail to meet minimum DASH/CDC standards for representativeness due to poor response rates or other sampling problems.

In 1993, sample sizes for states ranged from 1,122 to 6,695. Among participating cities, samples sizes ranged from 507 to 3,291. In most cases, sample sizes are sufficiently large to allow for separate estimates by such background characteristics as age, grade, and sex. In cases where minority representation is sufficiently large, separate estimates for whites, blacks, and Hispanics may also be possible. In existing CDC publications, however, reporting of state and city data are limited to total and gender-specific estimates.

Periodicity

The national YRBSS was initially fielded in 1990. It was fielded again in 1991, and has been repeated every two years since that time. State and city surveys were also fielded in 1990, and are intended to be repeated on a semi-annual basis. The number of participating states and cities has increased over time, though some have also dropped out. A full listing of participating states and cities by year is provided below. DASH/CDC intends to field and support these surveys through at least the year 2000.

Geographic Coverage

Participation in the YRBSS is open to all 50 states, the District of Columbia, U.S. possessions, and the 16 largest local education agencies. In 1990 26 states, D.C., and 9 other cities participated. In 1995 participation increased to 39 states, 16 cities and 4 U.S. possessions.

Below is a listing of all states and localities who participated in 1990, 1991, 1993, and 1995. A "✓" indicates participation during the year indicated. An asterisk indicates that the survey sample was not certified by DASH/CDC as representative. A "^" indicates that the state sample did not include students from the states largest city (see "Limitations" section for additional information).

Geographic Area	1990	1991	1993	1995
United States	✓	✓	✓	✓
STATES				
Alabama	✓	✓	✓	✓
Alaska				✓
American Samoa			✓	
Arizona		✓*	✓*	✓*
Arkansas	✓*		✓*	✓
California	✓*	✓*	✓*	✓*
Colorado	✓	✓*^	✓*	✓
Connecticut				✓*
Delaware			✓*	✓*
District of Columbia	✓	✓*	✓	✓*
Florida		✓*	✓*	
Georgia	✓	✓	✓	✓*
Guam				✓
Hawaii		✓*	✓	✓
Idaho	✓	✓	✓	✓*
Illinois			✓	✓
Iowa	✓*	✓*	✓*	✓*

	1990	1991	1993	1995
Kansas	✓*		✓*	✓*
Kentucky	✓*		✓*	
Louisiana	✓		✓^	✓*
Maine			✓*	✓
Marshall Islands				✓*
Maryland		✓*		
Massachusetts	✓		✓	✓
Michigan			✓*	✓*
Mississippi	✓		✓	✓
Missouri			✓*	✓
Montana		✓*	✓	✓
Nebraska	✓*	✓	✓	✓*
Nevada			✓	✓
New Hampshire	✓*	✓*	✓	✓
New Jersey		✓*	✓*	✓
New Mexico	✓	✓	✓*	✓*
New York	✓*^	✓^	✓^	
North Carolina	✓		✓	✓
North Dakota				✓
Northern Mariana Islands				✓*
Ohio			✓	✓
Oklahoma	✓*			
Oregon	✓*	✓*	✓*	✓*
Pennsylvania	✓*	✓*^		
Puerto Rico		✓		
Rhode Island				✓*
South Carolina	✓*	✓	✓	✓
South Dakota	✓	✓	✓	✓
Tennessee	✓*	✓*	✓	✓*
Texas		✓*	✓*	
Utah	✓	✓	✓	✓
Vermont			✓	✓
Virgin Islands		✓*	✓	✓
Virginia			✓*	
Washington		✓*		
West Virginia	✓		✓	✓
Wisconsin	✓*	✓*	✓	✓*
Wyoming		✓*	✓*	✓

	1990	1991	1993	1995
CITIES				
Baltimore				✓*
Boston		✓*	✓	✓
Chicago		✓	✓	✓
Dallas	✓	✓	✓	✓
Denver			✓*	✓
Detroit				✓*
District of Columbia	✓	✓*	✓	✓*
Fort Lauderdale, FL	✓*	✓	✓	✓
Houston				✓
Jersey City, NJ	✓	✓	✓	✓
Los Angeles				✓*
Miami	✓	✓	✓	✓
New Orleans			✓*	✓
New York City		✓	✓*	
Philadelphia	✓	✓	✓*	✓
San Francisco	✓*	✓*	✓*	✓*
San Diego	✓*	✓	✓	✓
Seattle	✓*		✓	✓

NOTE: "✓" = participation in year indicated
"*" = not certified by DASH/CDC as a representative sample
"^" = does not include students from largest city

Limitations

The YRBSS is a unique and valuable data resource, but one with some significant limitations. First and foremost, the data refer only to those youth who are in school. High school dropouts, who are in many cases more likely to exhibit negative health-related behaviors, are not included.

Second, a substantial proportion (40 percent in 1995) of the state and city surveys are not based on representative samples. Although estimates are reported by the CDC in such cases, results cannot be generalized to the state or city population of students, nor can the data be used to track trends over time. We strongly recommend that State Kids Count groups not report estimates that are derived from non-representative samples (see under *Geographic Coverage*, above, for identification of representative and non-representative surveys for 1991 and 1993).

Third, there is a bill currently before Congress titled the Family Privacy Act which could endanger the future of the national, state and local YRBSS surveys. At present the Federal government requires only parental notification, with the opportunity to withdraw children from the survey. The bill would require active, written consent from parents as a prerequisite for student participation. Such a requirement makes it much more difficult and expensive to draw a representative sample, and may induce many states and cities to withdraw from the survey or to field surveys based on non-representative samples. The chances of the bill passing with the active parental consent requirement are not clear at this time.

Indicators and Other Measures

In the most recent summary publication of the CDC reporting state and city estimates from the YRBSS, the following indicators were reported:[11]

Behaviors related to Intentional or Unintentional Injury:
% who report they rarely or never used safety belts
% who report they rarely or never used motorcycle helmets
% who report they rarely or never used bicycle helmets
% who report having ridden with a driver who had been drinking alcohol one or more times in the last 30 days
% who report having carried a weapon during the previous 30 days
% who report having carried a gun during the previous 30 days
% who report having been in a physical fight during the previous 12 months
% who report missing one or more days of school in the previous 30 days because they felt unsafe at school or unsafe traveling to and from school
% who report having seriously considered suicide during the previous 12 months
% who report having attempted suicide during the previous 12 months

Tobacco Use:
% who have ever smoked cigarettes
% who report having smoked any cigarettes within the previous 30 days
% who report smoking cigarettes daily in the last 30 days
% who report having used smokeless tobacco within the last 30 days

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[11] Data are not available for all measures for all participating states and cities, as some choose to drop particular questions from their surveys.

Alcohol and Other Drug Use:

- % who report ever having had a drink of alcohol
- % who report having had one or more drinks in the previous 30 days
- % who report having had five or more drinks on a single occasion within the last 30 days (episodic heavy drinking)
- % who report having ever used marijuana
- % who report having used marijuana within the previous 30 days
- % who report having ever used cocaine
- % who report having used cocaine within the previous 30 days
- % who report having ever used crack or freebase cocaine
- % who report having ever used steroids
- % who report having ever used intravenous drugs

Sexual Behavior:

- % who report ever having had sexual intercourse
- % who report a total of four or more partners
- % who report being sexually active (having had intercourse during the previous three months)
- % of sexually active students who used a condom during last intercourse
- % of sexually active students who report having used birth control pills during last sexual intercourse

Dietary Behaviors:

- % who thought they were overweight
- % who were on a diet
- % who report eating five or more servings of fruits and vegetables on the day preceding the survey
- % who report eating no more than two servings of foods high in fat content on the day preceding the survey

Physical Activity:

- % who report engaging in vigorous physical activity three or more times in the seven days preceding the survey
- % who report participating in physical exercises in four or more of the seven days preceding the survey
- % who report engaging in strengthening exercises in four or more of the seven days preceding the survey
- % who attended PE class daily

Many of the measures related to violence and drug use are asked generally, and specifically with regard to activities on school grounds.

In this data set background characteristics are limited to age, grade, sex, and race/ethnicity. There are, unfortunately, no family background characteristics such as income or family structure.

Major Publications

Results from the YRBSS are published regularly in the Morbidity and Mortality Weekly Report, a journal of the Centers for Disease Control. Every two years results at the national, state, and local levels are compiled into a single publication as part of the CDC Surveillance Summaries series. The publications for the 1991 and 1993 surveys are listed below. State and city data are often reported separately by sex, but not by other categories such as race or grade.

In addition, many state and city Departments of Education produce their own publications that may provide additional data. These publications may provide estimates six or more months before they are available from the CDC. Please see Appendices E and F for contact persons in individual states and cities.

Centers for Disease Control and Prevention. 1995. Youth Risk Behavior Surveillance - United States, 1993. CDC Surveillance Summaries, March 24, 1995. MMWR 1995; 44 (No. SS-1).

Centers for Disease Control and Prevention. 1990-1991 Youth Risk Behavior Surveillance System. Chronic Disease and Health Promotion Reprints from the MMWR.

Some analyses of national, state, and city data for 1995 should be available through CDC publications beginning in July of 1996. For more information please contact Laura Kann of the CDC (see below).

Data Availability

Survey microdata from the national YRBSS survey are available from the following source:

National Technical Information Service
5285 Port Royal Road
Springfield, VA 22161
(703) 487-4650

Survey microdata for state and localities can only be released by the relevant state departments of education. States and cities also receive from the CDC an extensive series of printed bivariate crosstabulations of every behavioral measure by sex, race/ethnicity, age, and grade.[12]

The departments are under no obligation to share either the microdata or the printed tabulations, but many may be willing to do so. See Appendices E and F for contacts in each state and city.

Custom Analyses

There are no provisions for organizations to do custom analyses of these data.

Contact Persons

For substantive questions about the YRBSS, or for information concerning all CDC publications containing state and city estimates, contact:

Laura Kann, Ph.D.
CDC
4770 Buford Highway
Mail Stop K33
Atlanta, GA 30341-3724
(770) 488-5336

To make inquiries regarding individual state and city publications of YRBSS data, or regarding access to state survey data, contact the relevant department of education representative listed in Appendices E and F.

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[12] In these crosstabulations, any cells with fewer than 100 observations are blanked out to ensure that estimates are not made based on insufficiently large sample sizes.

Behavioral Risk Factor Surveillance System (BRFSS)

Description

The Behavioral Risk Factor Surveillance System is an annual telephone survey of adults ages 18 and older that measures and tracks modifiable risk factors for chronic diseases and other leading causes of death. The BRFSS is funded and coordinated through the U.S. Centers for Disease Control and Prevention. BRFSS surveys are currently fielded in each of the 50 states, the District of Columbia, and the territories of Guam, Puerto Rico, and the U.S. Virgin Islands. Each area fields a survey which is representative of its own adult population, allowing for the production of state-specific estimates. Sample sizes range between 1500 and 4000 adults ages 18 and older for each state and territory. The CDC provides substantial technical assistance to each state.

The largest part of each survey is taken by a common core of questions which is fielded by all participating states and territories. This ensures consistency of coverage and comparability across states. The survey currently has two rotating sets of core questions, each of which are fielded every other year. In addition, each state may choose to field one or more standardized topical modules on the following topics: diabetes, sexual behavior, health care coverage, smokeless tobacco use, arthritis, quality of life, health care utilization, oral health, preventive counseling services, hypertension awareness, cholesterol awareness, cardiovascular disease, adult immunization, colorectal cancer screening, injury control, alcohol consumption, firearms, social context, fruit and vegetable consumption, exercise, weight control, years of healthy life, and problems particular to persons ages 65 and older. Data from these modules are also comparable across all states that choose to field them. Finally, states may add their own questions to the survey fielded in their state. Overall, the survey is designed to allow for both comparability across states and maximum flexibility to states to adapt the survey to meet their specific needs.

All surveys are fielded by the state health departments, with funding and strong technical assistance from the Centers for Disease Control and Prevention. All interviews are conducted by telephone.

Periodicity

The survey has been conducted annually since 1984. However, because there are two rotating core portions of the survey, many measures are available only every other year. Further, questions in modules and those designed by individual states may only be available on an occasional or one-time basis.

Geographic Coverage

The survey have been fielded annually since 1984, with new states joining each year. (see listing below). Since 1994 all 50 states, the District of Columbia, and the territories of Guam, Puerto Rico, and the U.S. Virgin Islands have participated.

Year in Which Each State Joined the BRFSS System

YEAR	STATES
1984	AZ CA ID IL IN MN MT NC OH RI SC TN UT WV WI
1985	DC FL GA KY NY ND
1986	AL HI MA MO NM
1987	ME MD MI NE NH SD TX WA
1988	CT IA OK
1989	OR PA VA
1990	CO DE LA MS VT
1991	AK NJ
1992	KS NV
1993	AR
1994	WY

Limitations

The chief limitation of this survey for tracking trends in child well-being is the small number of measures that can be related directly to children. The survey is primarily a survey about adult health risk factors. Relevant measures are listed below under *Indicators and Other Relevant Measures*. In addition, because the survey does not ask whether the respondent is the parent of any of the children in the household, one cannot generate "parental health risk" measures.

A second limitation comes from the fact that these surveys are fielded strictly as telephone surveys. This excludes all households who lack telephones, which tend to be lower income households. The amount of bias this introduces into estimates generated from the survey will differ from measure to measure. Analyses by the CDC comparing BRFSS estimates for selected health-related behaviors (smoking, chronic heavy drinking, and seat belt use) with estimates from in-person surveys (which include those without telephones) indicate that BRFSS estimates compare favorably with in-person survey results on these measures.

Indicators and Other Measures

Every year, the following measures are fielded as part of the core survey:
number of children in household ages 0-4, 5-12, and 13-17.
Household income (by $5,000 to $25,000 increments)

The following measures are fielded as part of the core survey every other year:
how often oldest child (under age 16) wears seat belt;
how often oldest child (ages 5-15) wears a bicycle safety helmet while riding;
presence of a smoke detector in the home;
last time the smoke detector was tested;
adult opinion concerning the grade at which children should receive education about HIV and AIDS in school;
adult opinion concerning whether they would encourage their teen child to use a condom if he/she were sexually active.

The following measures are available only through the standardized *firearm* and *social context* modules, which the states may field or not at their discretion:
whether there are any firearms in or around the home;
whether any of them are handguns;
whether any of them are both loaded and not locked up
neighborhood safety estimate(extremely safe to not at all safe)
whether adult was concerned about having enough food for him or her self or family within the last 30 days.

Finally, the following measures that are fielded every other year in the core are offered as optional modules in alternate years, allowing states the option of tracking on an annual basis:
how often oldest child (under age 16) wears seat belt;
how often oldest child (ages 5-15) wears a bicycle safety helmet while riding;
presence of a smoke detector in the home;
last time the smoke detector was tested.

Major Publications

Results from the BRFSS are published in the CDC's Morbidity and Mortality Weekly Report (MMWR). Articles report indicators for specific risk areas. For a complete listing of MMWR articles reporting BRFSS data, contact the CDC's Behavioral Surveillance Branch (see below under *Contacts*).

National Center for Chronic Disease Prevention and Health Promotion. 1995. "Health Risks in America: Gaining Insights From the Behavioral Risk Factor Surveillance System." Centers for Disease Control and Prevention: Atlanta, GA.

Centers for Disease Control and Prevention. 1994. "Frequent alcohol consumption among women of childbearing age -- Behavioral Risk Factor Surveillance System, 1991." Morbidity and Mortality Weekly Report: 43: 328-329, 335.

Centers for Disease Control and Prevention. 1993. "Impact of adult safety-belt use on restraint use among children <11 years of age -- selected states." Morbidity and Mortality Weekly Report, 42: 576-579.

Data Availability

State data sets (or extracts of particular variables) may be obtained from the CDC's Behavioral Surveillance Branch (see below under *Contacts*). These data are currently available on 9-track tape. Starting in the fall of 1996, they will also be available on CD-ROM. In addition, there are plans to eventually make the data available over the Internet.

Custom Analyses

There are no services for the production of custom analyses.

Contact Persons

Michael Waller
Behavioral Surveillance Branch
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control and Prevention
U.S. Department of Health and Human Services
Mail Stop K-30
4770 Buford Highway, NE
Atlanta, GA 30341-3724
(770) 488-5292

In addition to the federal contact, we have included a listing of state contacts in Appendix H.

National Immunization Survey (NIS)

Description

This is a continuous survey designed to provide quarterly estimates on levels of immunization among children ages 19-35 months for each state and for 27 urban areas identified as having populations at high risk for under-vaccination. Interviews with both parents and their health care providers are conducted by telephone. Parents are asked to refer to written records. Follow-up interviews with health care providers are conducted to improve the accuracy of the estimates.[13] A minimum of 400 interviews per year are conducted for each state and urban area. Results from the first 9 months indicate an overall response rate of 71 percent, with a range of between 61 percent and 88 percent among individual states.

The survey is a joint project of the National Center for Health Statistics and the National Immunization Program of the Centers for Disease Control and Prevention. It is one component of the Childhood Immunization Initiative, a national program to achieve and maintain high vaccination levels among children through the first two years of life.

Periodicity

The survey was first fielded in April of 1994. Originally designed to last a total of four years, current legislation before the U.S. Senate eliminates all funding for the survey, making its future uncertain. This legislation does allow individual states to contract to continue the survey using money from their share of federal immunization funds. It is unclear how many or which states are likely to exercise this option.

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[13] These are conducted only when the parent does not have complete written vaccination records in the home.

Geographic Coverage

The survey covers all 50 states and the District of Columbia. In addition, it covers the following 27 urban areas:

Jefferson County, Alabama
Maricopa County, Arizona
Los Angeles County, California
Santa Clara County, California
San Diego County, California
Duval County, Florida
Dade County, Florida
Fulton/DeKalb Counties, Georgia
City of Chicago, Illinois
Marion County, Indiana
Orleans Parish, Louisiana
City of Baltimore, Maryland
City of Boston, Massachusetts
City of Detroit, Michigan
City of Newark, New Jersey
New York City, New York
Cuyahoga County, Ohio
Franklin County, Ohio
City of Philadelphia, Pennsylvania
Shelby County, Tennessee
Davidson County, Tennessee
Dallas County, Texas
El Paso County, Texas
City of Houston, Texas
Bexar County, Texas
King County, Washington
Milwaukee County, Wisconsin

Limitations

The major limitation of the survey is that it does not include information on children living in households that do not have telephones. Children in such households have been shown to have lower rates of vaccination than those from homes that have telephones. The CDC applies a correction factor to all estimates issuing from the survey to correct for this.

Indicators and Other Measures

The survey collects a vaccination history on the following vaccines: DTP/DT,[14] Poliovirus, Hemophilus influenza type b, Measles (MCV), and Hepatitis B. Full vaccination is defined as having received the full series of four doses DTP, three doses Polio, and one dose MCV vaccine (4:3:1 series).

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[14] Diphtheria and tetanus toxoids and pertussis vaccine/Diphtheria and tetanus toxoids.

In addition to these standard vaccines, the survey asks about others received including chicken pox (varicella), BCG (tuberculosis), typhoid, yellow fever, malaria, Dtap, DTP/HiB, DTB/HepB, and four-in-one.

Demographic information collected on the children and their families include size of household, race and ethnicity, parental education and marital status, income, and child's sex and exact age.

Major Publications

As of March, 1995, data from this survey has been made available in two reports published in the Morbidity and Mortality Weekly Report (MMWR). These reports include rates of full vaccination (4:3:1 series) for each of the 50 states for children ages 19-35 months. The most recent publication includes coverage for the 4:3:1:3 series (which includes Haemophilus influenza type b vaccine coverage) as well as data for selected urban areas. Future reports, which should appear quarterly in the MMWR, will provide updates and additional detail. In addition, an article should appear in the Journal of the American Medical Association sometime in 1996.

Centers for Disease Control. 1996. "National, State, and Urban Area Vaccination Coverage Levels Among Children Aged 19-35 Months - United States, April 1994 - March 1995." Morbidity and Mortality Weekly Report. volume 45, number. 7, pp. 145-150.

Centers for Disease Control. 1995. "State and National Vaccination Coverage Levels Among Children Aged 19-35 Months - United States, April-December 1994." Morbidity and Mortality Weekly Report, volume 44, number 33, pp. 613-623.

Data Availability

Survey microdata are expected to be made available to the public no later than June, 1996. The public version of the data set will include information from the parent survey. If funds permit, data from the provider survey will be included also. Unless provider information is included, however, the survey will be of limited use for those wishing to estimate vaccination rates, as parents were shown in this survey to significantly underestimate rates of full vaccination coverage. For additional information on the public availability of this survey data, contact Dr. Robert Wright or Dr. Elizabeth Zell (see below).

Custom Analyses

At present there are no federal agencies or private organizations which will produce custom analyses either free or under contract.

Contact Persons

For information on survey design, publications, and data availability, contact:

Dr. Robert Wright
National Center for Heath Statistics
(301) 436-7100 ext. 164

Dr. Elizabeth Zell
National Immunization Program
Centers for Disease Control and Prevention
Public Health Service
U.S. Department of Health and Human Services
12 Corporate Square/ 5th floor
Atlanta, GA 30329
(404) 639-8392

National Health Interview Survey (NHIS)

Description

The National Health Interview Survey (NHIS) is a multi-purpose national survey that monitors the health status, health care utilization, and health-related behaviors of the U.S. population. Basic demographic and socioeconomic questions are also included. In 1996 the survey will include information on approximately 120,000 persons in over 40,000 households within the U.S. civilian, non-institutionalized population. The NHIS is funded and designed by the National Center For Health Statistics. Data are collected by the Bureau of the Census.

Prior to 1996 the survey consisted of a core set of survey questions, paired with a series of special supplements designed to address particular topics. A substantially redesigned NHIS survey will be fielded part way through 1996, and fully implemented in 1997. The redesigned NHIS will have three parts: a core, which gathers basic health information and is repeated every year;[15] a series of rotating periodic modules that will each be fielded every three to five years; and topical modules addressing special health issues that may be fielded one or more times. Periodic modules may feature such topics as health status, health care utilization, and health behaviors.

Adult household members will provide basic sociodemographic and health information on the family. A sample adult will be chosen to provide more detailed information on their own health status and behaviors. A separate interview with older children is also being considered. from the periodic and topical modules as well.

The survey has been substantially restructured in content as well as in structure. Even so, there has been a great deal of attention paid to maintaining trend data for key health measures. Because the survey instrument has not been finalized at this time, it is not possible to say precisely which measures have been retained in the core, which moved to a periodic module, and which have been removed altogether. There is a clear intention, however, to increase the amount of health data on children that will be covered each year in the core portion of the survey.

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[15] Under current plans only the core survey will be fielded in 1997.

Periodicity

This survey has been conducted on an annual basis since 1957. All questions in the core survey are asked every year. Periodic modules of questions are scheduled to be fielded every three to five years. The survey also fields modules of questions on special topics which may fielded one or more times, but which are not regularly repeated. A change in the sample design allows for the possibility of state-level estimates beginning in 1995.

Geographic Coverage

Prior to 1995, the NHIS was not designed to yield representative state-level estimates. Some researchers from the National Center for Health Statistics believe that the pre-1995 NHIS may contain representative samples for one or two of the very largest states (e.g., California and Texas), but this has never been investigated.

Beginning in 1995, however, the sampling frame was changed to include states as one of the levels in the frame. This means that representative state-level indicators could be produced in much the same manner as they are currently produced for the national *Kids Count Data Book* using data from the March Current Population Survey. Because of the necessity of combining several years worth of data to produce estimates for most states, indicators of child well-being produced from the NHIS will be restricted to the questions asked every year in the core survey.[16]

State-specific estimates based on three-year averages can be produced as early as 2000 (using 1997- 1999 data); those based on five-year averages in 2002. For the very largest states (perhaps the top four or five), simple indicators of acceptable accuracy might be produced based on a single year of data.

Limitations

State sample sizes which can be achieved through combining multiple years of data will still be insufficient to track uncommon but important medical conditions at the state level. Those who wish to produce state-specific estimates will have to pay a great deal of attention to the sample sizes they are dealing with and the statistical robustness of their estimates. It is unclear whether and to what extent the National Center for Health Statistics will be actively attempting to produce state-level estimates.

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[16] Even though the sample size of the NHIS is smaller than that of the March CPS (about 40,000 versus about 57,000 households), state-level estimates produced by combining multiple years of data may be nearly as accurate for the former as for the latter. This is because the NHIS is based on a non-overlapping sample, whereas the CPS has a 50 percent overlapping sample from one year to the next. Thus, combining two years of data gives an equivalent sample size of about 80,000 households for the NHIS, and about 85,500 households for the March CPS.

The NHIS does not include in its survey children who are institutionalized. While this is a relatively small group, it is important from a health perspective since many of the least healthy children and adults live in institutions.

Indicators and Other Measures

Beginning with the 1996 redesigned survey, the following child health and related indicators will be measured annually in the NHIS:

percent of children who are reported to be in excellent health
percent of children who have missed an average of three or more days per month due to illness or injury during the previous year
percent of children with excellent hearing
percent of children who have at least some vision problems
percent of children who are often unhappy, sad, or depressed
percent of children with poor mental health
percent of children who have a usual source of health care
source of usual health care (e.g., clinic, doctor's office or HMO, emergency room)
percent of children who have not seen a dentist in the previous year
percent of children with no health insurance
percent of children covered by (private, public) health insurance
percent of children who lacked health insurance at some point in the previous 12 months
percent of children who were unable to obtain needed health care in at some point in the previous year
percent of children who have been diagnosed with:
  attention deficit disorder
  developmental delay
  asthma
percent of children who have had the following conditions in the previous 12 months:
  asthma attack
  allergies
  eczema
  three or more ear infections

Major Publications

At present there are no publications containing state-level estimates from the NHIS, and the National Center for Health Statistics has no plans to publish such estimates.

Data Availability

The National Health Interview Survey is currently available on both 9-track tape and CD-ROM. The Surveys can be purchased from the National Technical Information service (see below).

Custom Analyses

There are at present no plans to produce custom analyses of state-level health estimates.

Contact Persons

For information on the content of the National Health Interview Survey, contact:

Ms. Ann Hardy
Branch Chief
Illness and Disability Statistics Branch
Division of Health Interview Statistics
National Center for Health Statistics
(301) 436-7089 ext 136

For information on creating state-specific estimates, contact:

Mr. John Horm
Branch Chief
Survey Planning and Development Branch
Division of Health Interview Statistics
National Center for Health Statistics
(301) 436-7093 ext. 152

To order NHIS survey data, contact:
National Technical Information Service
5285 Port Royal Road
Springfield, VA 22161
(703) 487-4650

Sexually Transmitted Diseases Surveillance System (STD)

Description

Since 1941, state health departments have reported cases of syphilis, including congenital syphilis, and gonorrhea. In 1983, CDC began collecting detailed demographic and clinical data on cases of congenital syphilis for national public health surveillance. It is estimated that 12 million persons acquire sexually transmitted diseases (STDs) each year in the United States. Two thirds of these cases are in persons under 25 years of age and one quarter of them are in teenagers.

State health departments report data to the CDC monthly, quarterly, and annually. Monthly reports include summary data for syphilis, by county and state. Quarterly reports include summary data for syphilis, gonorrhea, and other STDs by sex for the 50 states and 64 large cities. Annual reports include summary data for syphilis and gonorrhea by age, race, and sex for the 50 states and six large cities. Incidence rates are determined using Census Bureau estimates of population for the states. For the cities, population estimates are based on a method that combines Census Bureau data with marketing survey data.

As part of the more detailed data collection for cases of congenital syphilis, state and local health departments send case reports to the CDC that include the infant's date of birth, vital status, birth weight, gestational age, signs of congenital syphilis and case classification. Also included are: mother's age, race/ethnicity, whether she sought prenatal care, date of first prenatal care visit, date treated for syphilis. States have begun to develop reporting systems for chlamydia but they vary tremendously in quality. Thirty-six states now have chlamydia reporting legislation.

Periodicity

Annual

Geographic Coverage

All 50 states, the District of Columbia, and 63 cities with a population of 200,000 or greater. The cities are: Akron, Ohio; Albuquerque, New Mexico; Atlanta, Georgia; Austin, Texas; Baltimore, Maryland; Birmingham, Alabama; Boston, Massachusetts; Buffalo, New York; Charlotte, North Carolina; Chicago, Illinois; Cincinnati, Ohio; Cleveland, Ohio; Columbus, Ohio; Corpus Christi, Texas; Dallas, Texas; Dayton, Ohio; Denver, Colorado; Des Moines, Iowa; Detroit, Michigan; El Paso, Texas; Fort Worth, Texas; Honolulu, Hawaii; Houston, Texas; Indianapolis, Indiana; Jacksonville, Florida; Jersey City, New Jersey; Kansas City, Missouri; Los Angeles, California; Louisville, Kentucky; Memphis, Tennessee; Miami, Florida; Milwaukee, Wisconsin; Minneapolis, Minnesota; Nashville, Tennessee; New Orleans, Louisiana; New York City, New York; Newark, New Jersey; Norfolk, Virginia; Oakland, California; Oklahoma City, Oklahoma; Omaha, Nebraska; Philadelphia, Pennsylvania; Phoenix, Arizona; Pittsburgh, Pennsylvania; Portland, Oregon; Richmond, Virginia; Rochester, New York; Sacramento, California; San Antonio, Texas; San Diego, California; San Francisco, California; San Jose, California; Seattle, Washington; St. Louis, Missouri; St. Paul, Minnesota; St. Petersburg, Florida; Tampa, Florida; Toledo, Ohio; Tucson, Arizona; Tulsa, Oklahoma; Wichita, Kansas; Yonkers, New York; and San Juan, Puerto Rico.

Limitations

Under-reporting is a problem. The extent to which cases are reported varies by state and service provider. For example, public health clinics are much more likely to report cases than private practitioners. When reporting these data, it is best to refer to cases as reported cases of STDs.

Incidence reports vary based on definition and surveillance efforts. For example, in 1989 a new surveillance case definition for congenital syphilis was introduced. Simultaneously, many areas put additional efforts into active case finding for congenital syphilis. The result was a dramatic increase in reported cases between 1989-91. When reporting data such as this, it is essential to use caution so that changes in incidence caused by changes in reporting are not attributed to other causes.

Comparisons between states or cities are not recommended because of differences in definitions and surveillance efforts.

Indicators and Other Measures

Incidence of syphilis for 15-19 year olds
Incidence of gonorrhea for 15-19 year olds
Rate of congenital STD's per 100,000 live births
Incidence of other STDs for 15-19 year olds

Rates based on these incidence data can be calculated for states using state population estimates of the number of teens ages 15-19. Data are provided for incidence by age, race and sex. For congenital syphilis, data are collected on infant's vital status, birth weight, gestational age, signs of congenital syphilis, and case classification. Congenital syphilis reports also include data on mother's age and race/ethnicity, whether she sought prenatal care, the date of her first prenatal care visit, the date she was treated for syphilis and the treatment she received.

Major Publications

CDC: Sexually Transmitted Disease Surveillance. CDC's annual surveillance report consists of five parts: a national profile, regional and state profiles, state specific trends of P&S syphilis and gonorrhea; tables for general reference; and an appendix containing detailed information about the sources and limitations of the data. Recent editions are available via the World Wide Web. The address is:

http://wonder.cdc.gov/rchtml/convert/data/reports.html

State data for teen STD rates are generally not published in the surveillance report. In order to obtain this information you need to contact the Department of Health for the state you want information on.

The CDC also publishes special focus profiles on women, adolescents, and minorities.

Data for cities and more detailed breakdowns of the data on congenital syphilis appear occasionally in the CDC's Morbidity and Mortality Weekly Report series.

Data Availability

Data are available from state health departments. Accessibility at state and local level varies from area to area. State and local investigators and program officials who wish to perform additional analyses of local data that are not easily accessible through their programs may contact CDC to obtain copies of the aggregate data that have been submitted to the CDC.

There are plans to make data available on the World Wide Web through CDC Wonder, an electronic data and report access system. This system is under development so visitors to the site should occasionally check back to see what new things have become available. The address is http://wonder.cdc.gov/

Custom Analyses

The CDC does not provide custom analyses. We recommend checking with State Health Departments to see if this service is available on the state-level.

Contacts

For information about obtaining data or to get a free copy of the annual surveillance report contact:

Information Technology and Services Office
National Center for HIV, STD, and TB Prevention
Centers for Disease Control and Prevention
1600 Clifton Road
Mail Stop E-06
Atlanta, GA 30333

For information about the STD surveillance system contact:
Melinda Flock
(404) 639-8356

Pregnancy Risk Assessment Monitoring System (PRAMS)

Description

The Pregnancy Risk Assessment Monitoring System (PRAMS) was initiated in 1987 by the Division of Reproductive Health at the Centers for Disease Control and Prevention to provide data on selected maternal behaviors. PRAMS is an ongoing, population-based surveillance system that obtains self-reported behavioral information from new mothers. This information is linked to birth certificate data for analysis. The system is designed to generate state specific data and allow cross state comparisons through the use of standardized data collection procedures. It was initiated in 1987 with five states and the District of Columbia. Since then eight additional states have begun participating.

The PRAMS sample is obtained from birth certificates. A sample is selected from all live births occurring during a specific period in a given state. Every month each state draws a stratified systematic sample of 100-200 births. The sample selection is designed to provide an over-sample of populations with an increased risk of poor birth outcomes (low birth weight babies, mothers who received inadequate prenatal care, and/or minority groups).

Data collection is done through a mail survey with telephone follow-ups for non-respondents. In defined geographic areas mothers are selected for participation through hospital-based surveillance. This has proved to be an effective method for increasing survey responses among populations that are normally difficult to reach.

The survey consists of two parts: a core portion that is identical for all states and a state-specific portion. Core questions relate to maternal behavior and birth outcomes and include focus on the use of cigarettes and alcohol before and during pregnancy, whether pregnancy was intended, and stressful events during pregnancy. State specific questions address such topics as mental health and social support, occupation and physical activity, drug use, and receipt of social services.

Periodicity

Data collected monthly since 1988

Geographic Coverage

Indiana, Maine, Michigan, Oklahoma, West Virginia, and Washington, D.C. began collecting data in 1988. Alaska begin collecting data in 1990. Alabama, California (part of the state only), Florida, Georgia, Indiana, New York (excluding New York City), South Carolina and Washington state began data collection in 1993.

Grants to PRAMS states are up for renewal in 1996. The CDC anticipates adding a few new states. In addition, some states that currently collect data may not be renewed. You can contact Dr. Wilcox (see "Contacts") to find out what states will be included in future data collection.

Limitations

The data in this survey provides very important and valuable information regarding pregnancy. It is an unfortunate limitation that CDC is able to fund only a limited number of states for participation in this survey.

Substance abuse may be under-reported. Data may not allow analysis of subgroups of interest if they represent only a small segment of the population of a particular state. Only infant care pertinent to the first 2 months after childbirth are captured in this survey.

Indicators and Other Measures

Percent desiring pregnancy before becoming pregnant
Month of first prenatal care visit
Barriers to prenatal care
Number of visits for prenatal care
Source of prenatal care
Percent of prenatal care providers who gave nutrition advice
Percent of mothers participating in WIC
Percent smoking cigarettes in the 3 months before pregnancy
Percent smoking cigarettes in the last 3 months of pregnancy
Amount of alcohol drunk in the 3 months before pregnancy
Amount of alcohol drunk in the last 3 months of pregnancy
Percent of mothers abused 12 months prior to pregnancy and during pregnancy
Percent of mothers experiencing stressful events during 12 months prior to delivery
    illness of close relative
    separation from husband or partner

  - arrest
  - arrest of husband or partner
  - job loss
  - death of friend, family member, or partner
  - someone close to mother had a bad problem with drinking or drugs

Percent of newborns put in intensive care
Previous live births including information on premature and low-birth weight births
Payment source for prenatal care and delivery
Hospitalization during pregnancy
Length of stay in hospital at delivery
Sleep position of infant
Exposure to passive smoke
Mother's knowledge of folic acid
Percent of mothers breast-feeding
Number of visits for well-baby care
Percent using various sources for well-baby care
Barriers to receiving well-baby care

Major Publications

PRAMS data are not regularly reported in any single published source. The Morbidity and Mortality Weekly Report (MMWR) of the CDC carries occasional articles on PRAMS data sometimes using data from multiple states, sometimes from individual states. Individual states issue reports using PRAMS data (e.g., Oklahoma publishes the Oklahoma PRAMS-GRAM.)

A description of the methods used in PRAMS is available in "The Pregnancy Risk Assessment Monitoring System: Design, Questionnaire, Data Collection and Response Rates." Pediatric and Perinatal Epidemiology (1991) 5:333-346.

Data Availability

PRAMS data are collected by state health departments, and inquiries about obtaining data should be directed to those departments. If you are having difficulty locating the proper contact at the state-level, call the CDC at the number listed below.

Custom Analyses

The CDC does not provide custom analyses. We recommend checking with state health departments to see if this service is available on the state-level.

Contacts

For state-specific information initial contact should be made with state health departments. For general information about PRAMS you can contact:

Dr. Lynne Wilcox
Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion
Division of Reproductive Health
Program Services and Development Branch
Mail Stop K-22
1600 Clifton Road, NE
Atlanta, GA 30333
Telephone: (770) 488-5227

Uniform Crime Reports (UCR)

Description

Uniform Crime Reports (UCR) are compiled by the FBI and are considered the definitive count of crimes known to the police. The main objective is to produce a reliable set of statistics for use in law enforcement. UCR was initiated in 1930 as a voluntary national data collection effort. Local agencies were requested to report the incidence of crimes in their jurisdiction. Standardized definitions were created to overcome the variations in definitions of criminal offenses in different jurisdictions.

Local agencies report offenses to their state UCR office or, if a state agency does not exist, directly to the FBI. In 1994, forty-four states were operating a UCR office. UCR is a voluntary program so coverage is not complete. In 1994, law enforcement agencies active in the UCR program represented 96% of the national population. Reporting levels differed by size of place. Metropolitan Statistical Areas (MSAs) had 97% coverage in 1994. MSAs accounted for about 80% of the population of the U.S. in 1993. Cities outside of MSAs had 91% coverage in 1994; these cities accounted for 8% of the population in 1993. Rural areas were the least well covered, with 88% of the population covered in 1994. Twelve percent of the U.S. population lived in rural areas in 1993.

UCR reports are monitored for accuracy, and checked to make sure state and local agencies are complying with the definitions used by the FBI.

Periodicity

Annual

Geographic Coverage

All 50 states and the District of Columbia, Counties, Metropolitan Statistical Areas (MSAs), many municipalities including smaller cities and towns.

Limitations

Arrest rates are not valid indicators of the true incidence of criminal behavior. This is especially true of non-violent offenses, such as drug use and weapon possession. Even in cases where violence occurs, there may be no arrest or even report of a crime, as is evident in the well-known under reporting of rape and sexual assault. In addition, poverty and neighborhood characteristics influence the likelihood that a juvenile is going to be arrested. However, since being arrested does have repercussions for young people it can be worthwhile to look at arrest data, even for non-violent offenses.

Victimization surveys, such as the National Crime Victimization Survey, generally provide a better measure of the incidence of most crimes. The major exceptions, for obvious reasons, are homicide and non-negligent manslaughter. Data on incidence and characteristics of victims for homicide should be taken from the UCR, since these crimes are very likely to become known to the police.

While the UCR has relatively high rates of coverage there are some areas that have lower rates of reporting. Rates of coverage should be checked, especially when reporting data for rural areas.

Indicators and Other Measures

Statistics from the Uniform Crime Report (UCR) can be used to construct offense rates and victimization rates. The ability to do this is limited by the availability of population estimates for appropriate age groups.

Number of arrests for homicide, rape, robbery, aggravated assault -- can be combined to produce a juvenile violent crime arrest rate. A commonly reported rate of this type is per 100,000 youths age 10-17.

Number of arrests for burglary, larceny, weapons offenses, motor vehicle theft, arson, simple assault, vandalism, drug offenses, drunkenness, violation of liquor laws, driving under the influence

Offenses against the family and child (includes nonsupport, neglect, desertion, or abuse of family and children)

Curfew and loitering laws, runaways (persons under age 18 only)

Characteristics of victims of murders and non-negligent manslaughters known to the police (age, sex, race, relationship of offender to victim).

Major Publications

UCR data are published annually in *Crime in the United States*. The 1994 edition includes a section on "Child Homicide Victims, 1980-94" which addresses the increasing incidence of murder of children age 12 and under. State data are included in this volume.

Data Availability

Data not listed in *Crime in the United States* may be available through your state UCR office. If not, you can obtain data free of charge directly from the FBI, either on magnetic tape or in a printout by contacting the Statistical Analysis/Processing Division at (202) 324-3821.

Custom Analyses

The FBI will produce estimates for cities and counties within states for a small fee. For more information on this service, contact:

Mr. Bennie F. Brewer
UCR Program
Gallery Row Building
FBI
Washington, DC 20535
(202) 324-5015

Many states are willing to provide unpublished criminal justice statistics without charge. Contact the Uniform Crime Report office in the state of interest (see Appendix G). Finally, the FBI offers free printouts of data that are available, but not printed in Crime in the United States or other Justice Department publications.

Contacts

If your state has its own UCR program it is useful to contact them first. State UCR offices are more likely to have the most recent data and may collect more information than they are asked to report to the FBI. In 1994, all states except Indiana, Missouri, Mississippi, New Mexico, Ohio, and Tennessee had UCR programs. State UCR offices are listed in the back of recent editions of Crime in the United States. A current listing can also be found in Appendix G of the present document.

If you are in a state without a UCR program, or your state office is unable to provide you with what you need, you can contact the FBI directly at:

UCR
Criminal Justice and Information Services Division
FBI/GRB
Washington, DC 20535
(202) 324-5015

National Crime Victimization Survey (NCVS)

Description

The National Crime Victimization Survey (NCVS) is designed to provide information on rates of victimization on a wide variety of personal and property crimes. Information gathered includes characteristics of victims and offenders, details of the crimes themselves, and the consequences of crimes for the victims.

The survey has been fielded continuously since 1973. In 1995, approximately 60,000 households participated: over 90,000 persons ages 12 and older were interviewed. The same households are interviewed every six months for a total of three years.

The survey underwent a major redesign in the early 1990s which was fully implemented beginning in 1993. The redesign includes new information on sexual assaults and victimization by other family members. Improved question design has resulted in higher reporting rates for some offenses. Statisticians at the Bureau of Justice Statistics have developed a methodology for producing valid comparisons between pre- and post-redesign surveys for all published estimates.

Periodicity

Respondents are interviewed every six months for a total of three years. Results are published annually. The survey has been fielded since 1973.

Geographic Coverage

In 1991, the last year in which state estimates were produced, estimates were produced for the following states: California, Florida, Illinois, Massachusetts, Minnesota, New Jersey, New York, North Carolina, Ohio, Pennsylvania, and Texas.

The Bureau of Justice Statistics intends to resume producing state-specific estimates beginning in 1996. The number of states for which estimates are produced will depend in part on the number of requests received for such information, but is not expected to exceed the original list of states due to small sample sizes for other states.

Limitations

The major limitation of this data source is its lack of data on children under the age of 12. Additionally, rates of victimization of children and youth by other family members are very likely substantially under-reported.

Indicators and Other Measures

Due to relatively small sample sizes for even the largest state, and to the relative rarity of many crimes, state-specific estimates regarding the criminal victimization of children are difficult to produce. Some of the state measures produced in BJS reports may not be very accurate. Please discuss individual measures with BJS staff before using them as indicators.

The following child-related indicators will appear in the state-specific reports that BJS intends to produce beginning in 1996:

annual rate of victimization for youth ages 12-15, 16-19 for all crime, violent crime, and theft (available separately by sex)

In addition, it may be possible to construct an indicator measuring rates of child exposure to crime, the proportion of children living in families where one or more members has been the victim of crime in the previous year. This indicator is not currently produced by the Bureau of Justice Statistics, but might be on special request.

Major Publications

The Bureau of Justice Statistics produced state-level reports for eleven states through 1991 (see above for full listing). They will resume producing state reports in 1996, though it has not been decided for which states reports will be done. These reports contain the same tables produced for the publication listed below, which provides estimates for the nation as a whole. The state reports are not widely distributed, but are available on request from BJS (see below).

Bureau of Justice Statistics. 1995. Criminal Victimization in the United States: 1993: A National Crime Victimization Report. Bureau of Justice Statistics, U.S. Departments of Justice.

Data Availability

The publicly available microdata files do not contain state identifiers for reasons of confidentiality. The Bureau of Justice Statistics will, however, consider doing custom state-specific analyses on request (see below).

Custom Analyses

The Bureau of Justice Statistics intends to resume producing state-level estimates for between six and eleven of the largest states beginning in 1996. They will also produce special state tabulations on request.

Contact Persons

Michael R. Rand
Bureau of Justice Statistics
633 Indiana Ave., N.W.
Washington, D.C. 20531
(202) 616-3494

Marylin Monahan
Bureau of the Census
(301) 457-3925

Quick Reference Table of State and Local-Level Indicators of Child Well-being Which Can Be Produced With Data from the Federal Statistical System

I. Demographics and Family Structure

II. Economic Security

III. Education

IV. Health and Health-Related Behaviors

V. Crime, Violence and Delinquency

Quick Reference Table of State and Local-Level Indicators of Child Well-being Which Can Be Produced With Data from the Federal Statistical System

I. Demographics and Family Structure

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Percent of children who are minority (non-white, non-Hispanic)	S	Annual	every year	0-17	CPS (March)	Requires combining multiple years of data for most states.
Percent of children who are: white, black, Asian, Native American, and Hispanic	S	every 10 years	1990	0-17	Census	Estimates are available for very small geographic areas.
Children as a percent of the total population	S	Annual	every year	0-17	CPS (March)	Requires combining multiple years of data for most states.
Children as a percent of the total population	S,L	every 10 years	1990	0-17	Census	Estimates are available for very small geographic areas.
Percent of all households containing children	S,L	Every 10 years	1990	0-17	Census	Estimates are available for very small geographic areas.
Percent of children living in: two-parent families; single-parent families; no-parent families.	S	Annual	every year	0-17	CPS (12-month file)	Requires combining multiple years of data for most states.

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Demographics and family structure (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Percent of children living in: two-parent families; single-parent families; single female headed; single male headed; no-parent families.	S,L	Every 10 years	1990	0-17	Census	Estimates are available for very small geographic areas.
Percent of children living in institutions.	S,L	Every 10 years	1990	0-17	Census	
Percent of children who are linguistically isolated.	S,L	Every 10 Years	1990	5-17	Census	
Estimated number of children involved in divorce	S, L*	Annual	every year	0-18	Vital Stats	Data for states in the Divorce Registration Area (DRA) only; beginning with 1996 data will not be collected by the federal government, some state vital statistics offices may continue to collect this data.

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II. Economic Security

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Income and Poverty						
Poverty: percent of children in poverty	S	Annual	every year	0-17	CPS (March)	Requires combining 3-5 years of data for most states.
Poverty: percent of children in poverty	S,L	Every 10 years	1990	0-17	Census	Can be calculated for small geographic areas, and for demographic sub-groups.
Median income of families with children	S	Annual	every year	0-17	CPS (March)	Requires combining 3-5 years of data for most states.
Median income of families with children	S,L	Every 10 years	1990	0-17	Census	Can be calculated for small geographic areas, and for demographic sub-groups.
Child Support: percent of eligible children who receive support.	S	Biennial	1986, 1988, 1990, 1992, 1994	0-17	CPS (April)	Requires combining multiple years of data for most states.
Public Assistance						
Percent of children in families who received: AFDC; Food Stamps; any public assistance.	S	Annual	every year	0-17	CPS (March)	Requires combining 3-5 years of data for most states.
Percent of children in poor families that have at least some earned income.	S	Annual	every year	0-17	CPS (March)	Requires combining 3-5 years of data for most states.

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Economic Security (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Employment						
Employment: percent of children with: 1 or more fully employed parent; No fully employed parents; No parents in labor force.	S	Annual	every year	0-17	CPS (March)	Requires combining 3-5 years of data for most states.
Employment: percent of children with: no parent in labor force; both or only parent in labor force; mother in labor force.	S	Every 10 years	1990	0-17	Census	Can produce separate estimates for parents of very young children.
Teen Idleness: percent of teens age 16-19 who are not working and not in school.	S	Annual	every year	16-19	CPS (12 month)	Requires combining 3-5 years of data for most states.
Teen Idleness: percent of teens age 16-19 who are not working and not in school.	S	Every 10 years	1990	16-19	Census	Estimates are available for very small geographic areas.

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Economic Security (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Housing and Neighborhood						
Housing: percent of households with children who live in: public housing; crowded conditions; poor quality housing; who own their home.	L*	About every 4 years	Varies by metropolitan area	0-17	AHS	Available for over 40 metropolitan areas.
Poor Neighborhoods: percent of children living in 40+ poverty neighborhoods	S,L	Every 10 years	1990	0-17	Census	Estimates are available for very small geographic areas.

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III. Education

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Achievement						
4th Grade Math Achievement Scores (overall scores and specific math skills)	S*	Irregular	1996	4th graders	NAEP	
8th Grade Math Achievement Scores (overall scores and specific math skill scores)	S*	Irregular	1990, 1992, 1996	8th graders	NAEP	Public schools only in 1990 and 1992
4th Grade Reading Achievement Scores	S*	Irregular	1992, 1994, 1998 (planned)	4th graders	NAEP	Public schools only in 1992
8th Grade Reading and Writing Achievement Scores	S*	Irregular	1998 (planned)	8th graders	NAEP	
8th Grade Science Achievement Scores	S*	Irregular	1996	8th graders	NAEP	
High school dropout: percent of teens ages 16-19 who are high school dropouts.	S	Annual	every year	16-19	CPS (12 month file)	Requires combining 3-5 years of data for most states.
Percent of children below age 16 who are 2+ years below age for grade	S	Annual	every year	7-15	CPS (October)	Requires combining 3-5 years of data for most states.

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Education (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
School Characteristics						
Average class sizes	S	Current plans are for every 5 years	1987-88, 1990-91, and 1993-94	6-18	SASS	State level data for public schools only; Regional data available for private schools.
Current expenditure per pupil in average daily attendance and per students enrolled	S, L	Annual	1985 and after	5-18	CCD	Public schools only; Local data are from school districts
Number of guidance counselors (total, elementary, and secondary)	S, L	Annual	1985 and after	6-18	CCD	Public schools only; Local data are from school districts
Number of librarians (total, elementary, and secondary)	S, L	Annual	1985 and after	6-18	CCD	Public schools only; Local data are from school districts
Number of students dropping out (overall, by race and by grade level)	S*	Annual	Begun in 1991-92	7th grade to 12th grade	CCD	Public schools only; Local data are from school districts
Number of students enrolled (overall, by race, grade level, and sex)	S, L	Annual	1985 and after	5-18	CCD	Public schools only; Local data are from school districts

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** NOTE: S = State data, L = Local data,
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Education (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Percent of teachers and percent of principals who view the following as serious problems: tardiness; absenteeism; physical conflicts among students; robbery or theft; vandalism; student pregnancy; student alcohol or drug use; student weapon possession; physical abuse of teachers; verbal abuse of teachers; student disrespect for teachers; dropping out; student apathy; lack of academic challenge; lack of parental involvement; parental alcohol or drug abuse; poverty; racial tension; cultural conflicts.	S	Current plans are for every 5 years	1987-88, 1990-91, and 1993-94	6-18	SASS	State level data for public schools only; Regional data available for private schools.
Percent of total expenditures used for instruction	S, L	Annual	1985 and after	5-18	CCD	Public schools only; Local data are from school districts
Student-teacher ratio (Overall, pre-kindergarten, kindergarten, elementary, and secondary)	S, L	Annual	1985 and after	5-18	CCD	Public schools only; Local data are from school districts
Students receiving regular and equivalency diplomas	S, L	Annual	1985 and after	5-18	CCD	Public school only; Local data are from school districts

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Education (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
School's with after school programs	S	Current plans are for every 5 years	1987-88, 1990-91, and 1993-94	6-18	SASS	State level data for public schools only; Regional data available for private schools.
Teacher's reports on the availability of computers for student's use	S*	Biennial	1990, 1992, 1994, 1996	1990 8th graders; 1992 4th and 8th graders, 1994 4th graders	NAEP	Indicator is based on number of students taught by the teacher not the number of teachers; public schools only 1990, 1992.
Teacher's reports on the availability of instructional material and resources	S*	Biennial	1990, 1992, 1994, 1996	1990 8th graders; 1992 4th and 8th graders; 1994 4th graders	NAEP	Indicator is based on number of students taught by the teacher not the number of teachers; public schools only 1990, 1992.
Student Characteristics						
Percent of public elementary and secondary students participating in free or reduced price lunch programs.	S	Current plans are for every 5 years	1987-88, 1990-91, and 1993-94	6-18	SASS	State level data for public schools only; Regional data available for private schools.
Percent of students receiving Chapter 1 or Title 1 services (services provided for disadvantaged students).	S	Current plans are for every 5 years	1987-88, 1990-91, and 1993-94	6-18	SASS	State level data for public schools only; Regional data available for private schools.

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Education (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Percent of 10-12th grade students in college preparatory courses	S	Current plans are for every 5 years	1987-88, 1990-91, and 1993-94	6-18	SASS	State level data for public schools only; Regional data available for private schools.
Percent of 12th graders applying to college	S	Current plans are for every 5 years	1987-88, 1990-91, and 1993-94	6-18	SASS	State level data for public schools only; Regional data available for private schools.
Student report on the amount of time they spend watching television each day	S*	Biennial	1990, 1992, 1994, 1996	1990 8th graders; 1992 4th and 8th graders, 1994 4th graders	NAEP	Indicator is based on number of students taught by the teacher not the number of teachers; public schools only 1990, 1992.
Student report on the amount of time they spend doing homework	S*	Biennial	1990, 1992, 1994, 1996	1990 8th graders; 1992 4th and 8th graders, 1994 4th graders	NAEP	Indicator is based on number of students taught by the teacher not the number of teachers; public schools only 1990, 1992.
Student report on how often a language other than English is spoken at home	S*	Biennial	1990, 1992, 1994, 1996	1990 8th graders; 1992 4th and 8th graders, 1994 4th graders	NAEP	Indicator is based on number of students taught by the teacher not the number of teachers; public schools only 1990, 1992.

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Education (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Student reports on days absent from school last month	S*	Biennial	1990, 1992, 1994, 1996	1990 8th graders; 1992 4th and 8th graders, 1994 4th graders	NAEP	Indicator is based on number of students taught by the teacher not the number of teachers; public schools only 1990, 1992.
Student report on types of reading material in the home (newspaper, encyclopedia, magazines, books)	S*	Biennial	1990, 1992, 1994, 1996	1990 8th graders; 1992 4th and 8th graders, 1994 4th graders	NAEP	Indicator is based on number of students taught by the teacher not the number of teachers; public schools only 1990, 1992.
Student report on the number of pages read each day for school and homework	S*	Biennial	1990, 1992, 1994, 1996	1990 8th graders; 1992 4th and 8th graders, 1994 4th graders	NAEP	Indicator is based on number of students taught by the teacher not the number of teachers; public schools only 1990, 1992.

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

IV. Health and Health-Related Behaviors

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Health Care Receipt						
Percent of 2 year olds with full immunization (4:3:1 series)	S,L*	Annual	1994 and after	19-35 months	NIS	This survey is intended to run for a total of four years.
Percent of 2 year olds who are up-to-date on any of the following vaccines: DTP/DT, Poliovirus, Hemophilus Influenza type b, MCV (measles), Hepatitis B, chicken pox, BCG (tuberculosis), typhoid, yellow fever, malaria, Dtap, DTP/HiB, DTB/HepB	S, L*	Annual	1994 and after	19-35 months	NIS	This survey is intended to run for a total of four years.
Percent of children who have a usual source of health care, by type.	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.
Percent of children who have not seen a dentist in the previous year	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.
Percent of children who were unable to obtain needed health care at some point in the previous year	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Health Insurance Coverage						
Percent of children with no health insurance coverage, private coverage, and public coverage	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.
Percent of children who lacked health insurance coverage at some time during the previous year.	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.
Health Insurance: percent of children not covered by health insurance.	S	Annual	every year	0-17	CPS (March)	Requires combining multiple years of data for most states.
Medical Conditions						
Rate of congenital syphilis per 100,000 live births	S, L*	Annual	1985 and after	Infants under age 1	STD	
Sexually transmitted disease (STD) rates per 100,000 teens. Includes syphilis, gonorrhea, chlamydia, and "other STDs".	S*, L*	Reported monthly, summarized annually	1985 and after	15-19	STD	Data are also available for older age groups

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Percent of children with: attention deficit disorder; developmental delay; asthma; allergies; eczema; 3+ ear infections in last year; hearing problems; vision problems.	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.
Percent of children who are reported to be in excellent health.	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.
Percent of children who missed 3+ days of school per month on average due to illness or injury.	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.
Percent of children who are often unhappy, sad, or depressed.	S*	Annual	1997	0-17	NHIS	Requires combining multiple years of data for all but the largest states.
Percent of children who are in poor mental health	S*	Annual	1997	2-18	NHIS	Requires combining multiple years of data for all but the largest states.

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Nutrition						
Hunger: percent of adults with children in the household who worry about having enough food for self or family in previous 30 days	S*	varies by state	varies by state	0-17	BRFSS	
Overweight: percent of teen students who thought they were overweight	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Dieting: percent of teen students who report being on a diet.	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Healthy Foods: percent of teen students who report eating 5+ servings of fruit and vegetables previous day.	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Fatty Foods: percent of teen students who report eating no more than 2 fatty foods on previous day.	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Safety						
Seat belt use	S (some territories also)	Biennial (Annual for some states)	Varies by state	0-15	BRFSS	Refers to oldest child in household under age 16.
Bicycle helmet use	S (some territories also)	Biennial (Annual for some states)	Varies by state	5-15	BRFSS	Refers to oldest child in household ages 5-15
Smoke Detectors: presence and recency of testing for households with children	S (some territories also)	Biennial (Annual for some states)	Varies by state	0-17	BRFSS	
Neighborhood Safety: percent of adults with children in household who rate their neighborhood as extremely safe, or not at all safe	S*	Varies by state	Varies by state	0-17	BRFSS	
Firearms: percent of households containing children that contain firearms, handguns, unlocked and loaded firearms	S* (some territories also)	Varies by state	Varies by state	0-17	BRFSS	

** NOTE: S = State data, L = Local data,
S* = Data available for some states; L* = Data available for some local jurisdictions

Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
School safety: percent of teen students who missed school because of safety concerns	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Percent of teen students reporting that they rarely or never use: safety belts; bicycle helmets motorcycle helmets	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Drunk driving: percent of teen students who report having driven with a drunk driver in previous 30 days	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	

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Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Physical Activity						
Percent of teen students who report: regular exercise; Attend PE classes daily;	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies	9th-12th grade	YRBSS	
Sexual Behavior and Sex Education						
Percent of teen students who report: being sexually active; ever having intercourse; 4+ partners lifetime; using condoms; using birth control pills	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Adult opinion concerning the timing of HIV/AIDS education in school	S (some territories also)	Biennial (Annual for some states)	Varies by state	5-17	BRFSS	
Adult opinion on whether they would encourage their teen to use a condom if he/she were sexually active	S (some territories also)	Biennial (Annual for some states)	Varies by state	teen	BRFSS	

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Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Pregnancy and Newborns						
Number of births	S, L	Annual	1985 and after	Not Applicable	Vital Stats	
Previous live births, including number that were premature or low birth weight	S*	Annual	1988 and after	Pregnant women or ones who have given birth recently	PRAMS	Years of participation differ by state
Hospitalization and length of stay. During pregnancy and for delivery	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state
Fertility Rate (per 1,000 women)	S, L	Annual	1985 and after	Women aged 15-44	Vital Stats	
Infant Mortality Rate	S, L	Annual	1985 and after	0-1 year olds	Vital Stats	

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Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Percent of births with selected abnormal conditions (anemia, birth injury, fetal alcohol syndrome, Hyaline membrane disease/RDS, meconium aspiration syndrome, assisted ventilation less than 30 minutes, assisted ventilation 30 minutes or longer, seizures)	S, L	Annual	1985 and after	Newborns	Vital Stats	Incidence of fetal alcohol syndrome are likely to differ by locality because of differential diagnosis
Percent of births to unmarried mothers	S, L	Annual	1985 and after	Not Applicable	Vital Stats	Marital Status determined by comparison of last names in 6 states; Texas data is a considerable undercount of non-marital births
Percent of births to teenagers that are second births	S, L	Annual	1985 and after	Not Applicable	Vital Stats	
Percent of births to mother who smoked cigarettes and drank alcohol during pregnancy	S, L	Annual	1985 and after	Not Applicable	Vital Stats	Mothers are likely to underreport smoking and drinking on birth certificates; Data are more complete than PRAMS
Use of cigarettes and alcohol before and during pregnancy	S*	Annual	1988 and after	Pregnant women or ones who have given birth recently	PRAMS	Years of participation differ by state; A substantially higher percentage of mothers report drinking during pregnancy than on birth certificates, PRAMS likely to be more accurate in this regard.

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Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Mother physically abused 12 months prior to pregnancy and during pregnancy	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state
Stressful events in the 12 months before delivery (e.g. illness of close relative; separation or divorce from husband or partner; arrest; arrest of husband or partner; job loss; death of friend, family member, or partner; someone close to mother had a bad problem with drinking or drugs)	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state
Intendedness of pregnancy	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state
Sleep position of infant	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state; only covers infants 2 months old or younger
Mother's exposure to passive smoke	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state

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Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Mother's knowledge of folic acid	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state
Use of prenatal care (timing, number of visits, source of care)	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state; only covers care for the first 2 months of infant's life
Payment source for prenatal care and delivery	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state; only covers care for the first 2 months of infant's life
Percent of mothers receiving early prenatal care (within first three months of pregnancy)	S, L	Annual	1985 and after	All women who give birth	Vital Stats	
Percent of mothers receiving late or no prenatal care (those starting care after the 6th month or receiving no care)	S, L	Annual	1985 and after	All women who give birth	Vital Stats	
Barriers to prenatal care	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state; only covers care for the first 2 months of infant's life
Well-baby care visits (number, source)	S*	Annual	1988 and after	Women who have given birth recently	PRAMS	Years of participation differ by state; only covers care for the first 2 months of infant's life
Mortality						

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Health and Health-Related Behaviors (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Deaths from motor vehicle accidents	S, L	Annual	1985 and after	0-18	Vital Stats	
Violent Deaths (suicide, homicide).	S, L	Annual	1985 and after	0-18	Vital Stats	
Infant Mortality Rate	S, L	Annual	1985 and after	0-1 year olds	Vital Stats	
Child Mortality Rate by Age (rate per 100,000 in age group).	S, L	Annual	1985 and after	0-18	Vital Stats	Rates require use of population estimates.

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V. Crime, Violence and Delinquency

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Juvenile Arrest Rates						
Arrest rate for homicide, rape, robbery, aggravated assault	S,L*	Annual	1985 and after	10-17	UCR	Rate computation requires population data
Violent crime arrest rate (sum of arrests for homicide, rape, robbery, and aggravated assault)	S,L*	Annual	1985 and after	10-17	UCR	Rate computation requires population data
Arrest rate for burglary, larceny, weapons offenses, motor vehicle theft, arson, simple assault, vandalism, drug offenses, drunkenness, violation of liquor laws, driving under the influence	S,L*	Annual	1985 and after	10-17	UCR	Rate computation requires population data; arrest rates are a flawed indicator of the incidence of these offenses
Arrest rate for curfew and loitering laws and runaways (for those under age 18 only)	S,L*	Annual	1985 and after	10-17	UCR	Rate computation requires population data; arrest rates are a flawed indicator of the incidence of these offenses

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Crime, Violence and Delinquency (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Offenses Against Children						
Rate of offenses known to the police against the family and child (includes nonsupport, neglect, desertion, or abuse of family and children)	S,L*	Annual	1985 and after	10-17	UCR	Rate computation requires population data; arrest rates are a flawed indicator of the incidence of these offenses
Victimization rate for murder and non-negligent manslaughters known to the police	S,L*	Annual	1985 and after	10-17	UCR	Rate computation requires population data.
Victimization rates for youth ages 12-15 and 16-19 for all crimes, violent crime, and theft	S*	Annual	1985-1991, 1996+	12-19	NCVS	An indicator of children living in families who have been victims of crime may also be constructed.
Youth Violence						
Weapons: percent of teen students who report carrying a (weapon, gun) during the previous 30 days	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Fighting: percent of teen students who report being in a physical fight during the previous 30 days	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	

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Crime, Violence and Delinquency (continued)

Indicator Description	Geographic Coverage**	Periodicity	Years Available Since 1985	Approximate Age Group	Data Source	Notes
Suicide: percent of teen students who report having (thought about, attempted) suicide during the previous 12 months	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Drugs and Alcohol						
Tobacco: percent of teen students who report: smoking daily; ever smoked; smokeless tobacco use.	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Alcohol: percent of teen students who report: ever drinking; binge drinking.	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	
Other Drugs: Percent of teen students who report ever or current use of: marijuana; cocaine; crack; intravenous drugs; steroids.	S*,L*	Biennial	1990, 1991, 1993, 1995 (varies by state)	9th-12th grade	YRBSS	

Source Guide:

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Source Guide:

AHS	American Housing Survey
BRFSS	Behavioral Risk Factor Surveillance System
CCD	Common Core of Data
CPS	Current Population Survey
Census	Decennial Census
NAEP	National Assessment of Educational Progress
NCVS	National Crime Victimization Survey
NHIS	National Health Interview Survey
NIS	National Immunization Survey
PRAMS	Pregnancy Risk Assessment Monitoring System
SASS	Schools and Staffing Survey
STD	Sexually Transmitted Diseases Surveillance System
UCR	Uniform Crime Reports
Vital Stats	Vital Statistics System
YRBSS	Youth Risk Factor Surveillance System

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APPENDIX A

Federal-State Cooperative Program for Population Estimates and For Population Projections

FEDERAL-STATE COOPERATIVE PROGRAM FOR POPULATION ESTIMATES AND FOR POPULATION PROJECTIONS

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APPENDIX B

State Data Center Program Coordinating Organizations

State Data Center Program Coordinating Organizations

(Includes Business and Industry Data Center Components)

Since 1978, the State Data Center (SDC) Program has provided training and technical assistance in accessing and using Census data for research, administration, planning, and decisionmaking by the government, the business community, university researchers, and other interested data users. The Business and Industry Data Center (BIDC) Program, initiated in 1988, supports the business community by expanding SDC services to government, academic, and non-profit organizations that directly serve businesses.

The SDC/BIDC organizations also provide additional services denoted by various codes beneath their entry, and defined on the last page.

For more information on the SDC/BIDC programs, contact the
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Tennessee Tower, 8th Floor
312 8th Avenue North
Nashville, Tennessee 37247-0340

615-741-5453

Mr. Richard B. Bays
State Registrar and Chief
Bureau of Vital Statistics
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3191

512-458-7692

Ms. Geraldine R. Harris
Deputy State Registrar
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3191

512-458-7692

Mr. Tom Pollard
Director, Division of Statistical Services
Bureau of Vital Statistics
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3191

512-458-7362

Mr. Barry Nangle
Director, Bureau of Vital Records
Utah Department of Health
Box 142855
Salt Lake City, Utah 84114-2855

801-538-6186

Mr. Stefan Rosenstreich
Director, Division of Public Health
Analysis and Policy
Vermont Department of Health
108 Cherry Street, P.O. Box 70
Burlington, Vermont 05402

802-862-7300

Ms. Deborah M. Little R.N., M.P.S.
State Registrar and Director
Office of Vital Records and
Health Statistics
State Department of Health
P.O. Box 1000
Richmond, Virginia 23208-1000

804-371-6077

Mr. Ron Human
Acting Director, Center for Health Statistics
State Department of Health
P.O. Box 1000
Richmond, Virginia 23208-1000

804-786-6206

Noreen Michael, Ph.D.
Director, Health Statistics
Department of Health
Charles Harwood Memorial Hospital
St. Thomas, Virgin Islands 00820-4370

809-773-4050
809-773-1311, ext. 3508

Ms. Teresa Jennings
State Registrar and Director
Center for Health Statistics
Washington State Department of Health
1112 SE Quince Street, MS: 7814
Olympia, Washington 98504-7814

360-586-6779

Mr. Charles W. Bailey
State Registrar of Vital Statistics
Bureau of Public Health
Capitol Complex
Building 3, Room 513
Charleston, West Virginia 25305

304-558-2931

Mr. Edward Steichen
State Registrar
Division of Health
1 West Wilson Street, Room 172
Madison, Wisconsin 53702

608-266-1334

Ms. Lucinda McCaffrey
Deputy State Registrar
Vital Records Services
Department of Health
Hathaway Building
Cheyenne, Wyoming 82002

307-777-7264

APPENDIX E

State Education Agency HIV Coordinators

Organizations Awarded Cooperative Agreements School Health Education to Prevent HIV and Other Important Health Problems

State Education Agencies

HIV Education Coordinators

Alabama State Department of Education
Student Instructional Service
50 N. Ripley Street
Gordon Persons Bldg.., Room 5333
Montgomery Alabama 36130-3901
Joyce Moore (334) 242-8049
Fax # (205) 242-9708

Alaska Department of Education
Office of Instructional
Improvement and Evaluation
801 W. 10th Street
Juneau, Alaska 99801-1894
* Helen Mehrkens (907) 465-8730
Fax # (907) 465-3396

American Samoa Government
Department of Education
Division of Curriculum and Instruction
Administration Building
1 Seasame Street, P.O. Box DOE
Pago Pago, American Samoa 96799
Jeff Chun (684) 633-1246
Fax # 011-684-633-5184

Arizona Department of Education
School Improvement Unit
1535 West Jefferson
Phoenix, Arizona 85007
* Lynne Dulin, (602) 542-8709
Fax # (602) 542-3818

Arkansas Department of Education Curriculum
4 Capital Avenue
Little Rock, Arkansas 72201
(vacant) (501) 324-9741
Fax # (501) 324-9745

California State Department of Education
Healthy Kids Healthy California
721 Capitol Mall, 3rd Floor
P.O. Box 944272
Sacramento, California 95814
*Shirley Hazelett (916) 657-2810
Fax # (916) 657-5149

Colorado State Department of Education
201 East Colfax
Denver, Colorado 80203
*Mary VanderWall (303) 866-6766
Beth Shober (303) 866-6903
Fax # (303) 866-6785

Connecticut State Department of Education
165 Capitol Avenue
Hartford, Connecticut 06106
Veronica Skerker (203) 566-2763
Fax # (203) 566-5623

Delaware State Department of Public
Instruction
Townsend Building
Lockerman & Federal Street
P.O. Box 1402
Dover, Delaware 19903
Janet Arns (302) 739-4676
Fax # 302-739-3744

District of Columbia Public Schools
Office of Comprehensive School Health
Programs
215 G Street, N.E., Room 102
Washington, DC 20002
Linda Wright (202) 645-3674
Fax # (202) 645-3674

Florida Department of Education
325 W. Gaines Street, Suite 422
Tallahassee, Florida 32399-0400
Darcie Lolley (904) 488-7835
Fax # (904) 488-6319

Georgia State Board of Education
2054 Twin Tower East
Atlanta, Georgia 30334
* (vacant) (404) 651-9406
John Roddy (Acting) (404) 651-8300
Fax # (404) 651-9330

Guam Department of Education
Manuel F. Guerrero Administration Building
West Aspinall Avenue, P.O. Box D.E.
Agana, Guam 96910
Faye Kaible 0-11-671-477-2437
Fax # (671) 477-3772

Hawaii Department of Education
Office of Instructional Services
189 Lunalilo Home Road
Honolulu, Hawaii 96825
Mary Anne Isha Kane (808) 396-2557
Fax # (808) 548-5390

Idaho Department of Education
Consultant, HIV-AIDS/Health Education
650 W. State Street
Boise, Idaho 83720-0027
Anne Williamson (208) 334-2281
Fax # (208) 334-2228

Illinois State Board of Education
School Improvement Planning and Assistance
100 North First Street, Mailstop N242
Springfield, Illinois 62777
Glenn Steinhausen (217) 782-5235

Indiana Department of Education
Division of Student Services
State House, Room 229
Indianapolis, Indiana 46204-2798
Stephen Everett (317) 232-6975
* Brad Gumbert (317) 232-6975
Fax # (317) 232-9121

Iowa Department of Education
Bureau of Instruction and Curriculm
Grimes State Office Building
Des Moines, Iowa 50319-0146
Sue Donielson, Ed.D. (515) 281-3575
Fax # (515) 242-6025

Kansas State Department of Education
Educational Assistance Section
120 East 10th Street
Topeka, Kansas 66612
* Joyce Grosko (913) 296-6715
Fax # (913) 296-7933
Sharon Freden, Asst. Commissioner
Education Services

Kentucky Department of Education
Curriculum and Staff Development
500 Mero Street
827 Capital Plaza Tower
Frankfort, Kentucky 40601
John Wyatt (502) 564-3791
* Glenda Donoho (502) 564-4970
Fax # (502) 564-6721

Louisiana State Department of Education
Bureau of Student Services
626 N. 4th Street
Baton Rouge, Louisiana 70804-9064
Dean Frost (504) 342-5431
Fax # (504 342-6887

Maine Department of Education
Bureau of Instruction
State House Station #23
Augusta, Maine 04333
Joni Foster (207) 287-5930
Fax # (207) 287-5927

Marshall Islands
Ministry of Education,
P.O. Box 3
Marjuro, Marshall Islands 96960
Ms. Paulie Keliikoa (692) 625-3202
Fax # (692) 625-3861

Maryland State Department of Education
Division of Instruction
200 W. Baltimore Street
Baltimore, Maryland 21201
Deborah Somerville (410) 767-0305
Fax # (410) 333-2423

Massachusetts Department of Education
Learning Support Services
350 Main Street, 4th Floor
Malden, Massachusetts 02148
* Tim Hack (617) 388-3300, Ext. 474
Fax # (617) 388-3394

Michigan Department of Education
Comprehensive School Health Unit
Ottawa South Building, 2nd Floor
608 W. Allegan, Box 30008
Lansing, Michigan 48909
Pat Nichols (517) 373-1486
Fax # (517) 373-1233

Minnesota Department of Education
AIDS Prevention/Risk Reduction
Capitol Square Building Rm. 988
550 Cedar Street
St. Paul, Minnesota 55101
Ruth Ellen Luehr (612) 296-5833
Fax # (612) 297-5695

Mississippi State Department
Bureau of School Improvement
550 High School
Suite 804 39201
P.O. Box 771, Sillers 1304
Jackson, Mississippi 39205
Donna Lander (601) 359-3768
* Ginger Steadman (601) 359-2329
Fax # (601) 359-2326

Missouri Department of Elementary
and Secondary Education
Special Federal Instructional Programs
205 Jefferson Street
P.O. Box 480
Jefferson City, Missouri 65102
Janet Wilson (573) 526-6698
Fax # (573) 751-3805

Montana Office of Public Instruction
Curriculum Services Unit
Capitol Building
Helena, Montana 59620
* Spencer Sartorius (406) 444-4434
Rick Chiotti (406) 444-1963
Fax # (406) 444-3924

Nebraska Department of Education
Curriculum Services
301 Centennial Mall South
Box 94987
Lincoln, Nebraska 68509
* Ann Masters (402) 471-4816
Nancy Jo Hansen (402) 471-4342
Fax # (402) 471-0117

Nevada Department of Education
Basic Education
Capitol Complex
400 W. King Street
Carson City, Nevada 89710
Robbie Bacon (702) 687-3187
Fax # (702) 687-5560

New Hampshire State Department
of Education
School of Health Services
101 Pleasant Street
Concord, New Hampshire 03301
Joyce Johnson (603) 271-3889
Fax # (603) 271-1953

New Mexico Department of Education
School of Health Unit
120 S. Federal Place
Room 206
Santa Fe, New Mexico 87501-2786
Gail Blackwell, (505) 827-1805
Fax # (505) 827-1826

New Jersey State Department of Education
Division of Safe and Drug Free Schools
240 West State Street, CN 500
Trenton, New Jersey 08625
Sarah Kleinman (609) 984-1890
Fax # (609) 292-6483

New York State Education Department
Comprehensive Health & Pupil Services
318 M EB, Washington Avenue
Albany, New York 12234
Naomi Marsh (518) 474-5608
Fax # (518) 486-7290

North Carolina Department
of Public Instruction
Education Building, Room 6163
301 North Wilmington Street
Raleigh, North Carolina 27611-2825
Bob Frye (919) 715-1813
Fax # (919) 715-2229

North Dakota Department
of Public Instruction
Department of Public Instruction
State Capitol
Bismarck, North Dakota 58505-0440
* David Lee (701) 224-2269
Linda Johnson (701) 224-4138
Fax # (701) 224-2461

Northern Marianna Islands
State Board of Education
Public School System
P.O. Box 2855
Saipan, MP 96950
* Ms. Jackie Quitugua (670) 233-6969
Fax # (670) 288-0694

Ohio Department of Education
Student Development Division
Room 610
65 South Front Street
Columbus, Ohio 43215-4183
Joyce Brannan (614) 466-9540
Jeffer Jones (614) 728-3018
Fax # (614) 728-3768

Oklahoma State Department of Education
2500 North Lincoln Boulevard
Oklahoma City, Oklahoma 73105-4599
Amy Vogt (405) 521-6645
Fax # (405) 521-6205

Oregon Department of Education
Student Services
Public Service Bldg..
255 Capital Street, N.E.
Salem, Oregon 97310-0203
Paul Kabarec (503) 378-5585, Ext. 602
* Richard LaTour (503) 378-4327
Pat Ruzicka (503) 378-4327
Fax # (503) 373-7968

Pennsylvania Department of Education
Bureau of Curriculum and Instruction
333 Market Street
Harrisburg, Pennsylvania 17126-0333
* Marian Sutter (717) 787-9682
Jack Emminger (717) 787-6749
Fax # (717) 783-5420/772-3621

Puerto Rico Department of Education
Health Program
Tenience Caesar Gonzalez Street
P.O. Box 759
Hato Ray, Puerto Rico 00919
(vacant) (809) 753-0989
* Jose Merle (809) 753-0989
Fax # (809) 753-7921

Rhode Island Department of Education
School Support Services
Shepard Building
255 Westminster Street
Providence, Rhode Island 02903-3400
Jackie Harrington (401) 277-6523, Ext 2369
Fax # (401) 277-4979

South Carolina Department of Education
801 Rutledge Building
1429 Senate Street
Columbia, South Carolina 29201
(vacant) (803) 734-8490
Fax # (803) 734-6142

South Dakota Department of Education and
Cultural Affairs
Comprehensive School of Health Program
700 Governors Drive
Pierre, South Dakota 57501-2291
Laurie Jensen-Wunder (605) 773-3261
Fax # (605) 773-6779

Tennessee State Department of Education
Division of Curriculum and Instruction
84 Gateway Plaza
710 James Robertson Parkway
Nashville, Tennessee 37243-0379
Elizabeth Word (615) 532-6308
Fax # (615) 741-6236

Texas Education Agency
Division of Curriculum Development and Textbooks
1701 North Congress Avenue
Austin, Texas 78701
• Tommy Fleming (512) 463-4326
Fax (512) 475-3612/3667
B. J. Gibso (512) 463-9269
Thomas E. Anderson, Jr.,
Deputy Commissioner for Operations and Services
(512) 463-8994

Utah State Board of Education
Operations
250 East 500 South
Salt Lake City, Utah 84111
• Judy Allen (801) 538-7606
Fax # (801) 538-7521

Vermont Department of Education
Basic Education
120 State Street
Montpelier, Vermont 05620
Nancy Emberley (802) 828-3124
Fax 802-828-3140

Virginia Department of Education
P.O. Box 2120
101 North 14 Street
Richmond, Virginia 23219-2120
Fran Meyer (804) 225-4543
Fax # (804) 692-3163

Virgin Islands Department of Education
2133 Hospital Street, Chirstiansted
St. Croix, Virgin Islands 00820-4665
• Boyd A. Jackson, (809) 773-4476
Fax # (809) 773-5466

Washington State Education Department
Special Services and Professional Programs
Old Capitol Building, P.O. Box 47200
Olympia, Washington, DC 98504-7200
Pamela Tollefson (206) 586-0245
Fax # (206) 664-3575

West Virginia Department of Education
19000 Kanawha Boulevard, East,
Room B309
Charleston, West Virginia 25305-0330
Nancy Parr (304) 558-8830
Fax # (304) 558-0048

Wisconsin Department of Public Instruction
Bureau of Pupil Services
125 S. Webster Street
P.O. Box 7841
Madison, Wisconsin 53707-7841
Nic Pibble (608) 267-3750
Fax # (608) 267-1052

Wyoming Department of Education
Hathaway Bldg.. - 2nd Floor
2300 Capitol Avenue
Cheyenne, Wyoming 82002-0050
• Mike Smith (Director) (307) 777-6282
Monica Asher (307) 777-5315
Fax # (307) 777-5421

APPENDIX F

Local Education Agency HIV Coordinators

Local Education Agencies
HIV Education Coordinators

Baltimore City Schools
200 E North Avenue
Baltimore Browne (410) 396-8811
Fax # (410) 396-8063

Boston Public Schools
High School Office
55 New Dudley Street
Boston, Massachusetts 02120
* Nancy Strunk *(617) 635-8875, Ext. 148
Lois Harrison-Jones (617) 635-9050
Fax # (617) 635-8887

The School of Board of Broward County (Fort Lauderdale)
School Health
Kathleen C. Wright Administration Center
600 S.E. Third Ave., 7th Floor
Fort Lauderdale, Florida 33301
* Diane Scalise (305) 768-8974
Michael Weissberg (305) 768-8974
Fax # (305) 768-8969

Chicago Public Schools
Department of Instructional Support
1819 W. Pershing Road
Chicago, Illinois 60609
* Mr. Powhatan Collins (312) 535-8194
Dorothy Cowan (312) 535-4240
Fax # (312) 535-8028

The School Board of Dade County (Miami)
Comprehensive AIDS Information
and Education Program
1500 Biscayne Boulevard
Suite 409 L
Miami, Florida 33132
A. Nadine Gay (305) 995-7118
Fax # (305) 995-7122

Dallas Independent School District
Healthy Behaviors & Lifestyle Education
3434 South R.L. Thornto Freeway
Building D
Dallas, Texas 75224
Phyllis Simpson (214) 302-2700
Fax # (214) 302-2714

Denver Public Schools
Department of Instructional Services
900 Grant Street
Denver, Colorado 80203
Penny Ware (303) 691-7408
Fax # (303) 691-7393

City of Detroit School District
5057 Woodward, Room 1062
Detroit, Michigan 48202
Lisa Williams Brown (313) 494-1214
Fax # (313) 494-1689

Houston Independent School District
3830 Richmond Avenue, Level 3 South
Houston, Texas 77027
Gerri Moore (713) 892-6165
Fax # (713) 892-6188

Jersey City Board of Education
346 Claremeont Avenue
Jersey City, New Jersey 07305
David Chioda (201) 915-6039
Fax # (201) 915-6787

Los Angeles Unified School District
Office of Instruction
450 North Grand Avenue, Room A-319
Los Angeles, California 90012
Claudia Baker (213) 625-6429
* Ruth Rich (213) 625-6411
Fax # (213) 481-0889

Newark Board of Education
Division of Health Education
2 Cedar Street
Newark, New Jersey 07106
Ms. Pat Joyner (201) 733-7215
Fax # (201) 733-8042

New York City Board of Education
110 Livingston Street
Brooklyn, NY 11201
Ellen Shelton (718) 935-3252
Fax # (718) 935-2805

Orleans Parish School Board
4100 Touro Street., Rms., 127 & 129
New Orleans, Louisiana 70122
Sydonia Taylor (504) 365-8980
Fax # (504) 365-8979

The School District of Philadelphia
Division of Physical and Health Education
Administration Building
Room 323
21st Street South of the Parkway
Philadelphia, Pennsylvania 19103
* Cathy Balsley, (215) 299-8906
Fax # (215) 299-7795

San Diego Unified School of District
Health Services Department
4100 Normal Street
San Diego, California 92103
Jack Campana (619) 293-8213
Fax # (619) 294-2146

San Francisco Unified School District
School Health Programs Department
1512 Golden Gate Room 10
San Francisco, California 94115
* Joyce Fetro (415) 749-3400
Karen Hart (415) 749-3400
Fax # (415) 749-3420

Seattle Public Schools
Health Curriculum
1330 North 90th – Room 101
Seattle, Washington 98103
Pamela Hillard (206) 298-7987
Fax # (206) 298-7804

APPENDIX G

Directory of State Uniform Crime Reporting Programs[17]

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[17] The is an updated version of a list that appeared in: U.S. Department of Justice. 1994. Crime in the United States, 1994. Washington, D.C.: U.S. GPO.

Alabama	Alabama Criminal Justice Information Center Suite 350 770 Washington Avenue Montgomery, Alabama 36130 (334) 242-4900 x 225
Alaska	Uniform Crime Reporting Section Department of Public Safety Information System 5700 East Tudor Road Anchorage, Alaska 99507 (907) 269-5659
American Samoa	Commissioner Department of Public Safety Post Office Box 1086 Pago American Samoa 96799 (684) 633-1111
Arizona	Uniform Crime Reporting Arizona Department of Public Safety Post Office Box 6638 Phoenix, Arizona 85005 (602) 223-2263
Arkansas	Arkansas Crime Information Center One Capital Mall, 4D-200 Little Rock, Arkansas 72201 (501) 682-2222
California	Bureau of Criminal Statistics Department of Justice Post Office Box 903427 Sacramento, California 94203 (916) 227-3551
Colorado	Uniform Crime Reporting Colorado Bureau of Investigation 690 Kipling Street Denver, Colorado 80215 (303) 239-4300
Connecticut	Uniform Crime Reporting Program 294 Colony Street Meriden, Connecticut 06450 (203) 685-8030
Delaware	State Bureau of Identification Post Office Box 430 Dover, Delaware 19903 (302) 739-5875

District of Columbia

Data Processing Division
Metropolitan Police Department
300 Indiana Avenue, Northwest
Washington, DC 20001
(202) 727-4301

Florida

Uniform Crime Reports Section
Social Services Bureau
Florida Department of Law Enforcement
Post Office Box 1489
Tallahassee, Florida 32302
(904) 487-1179

Georgia

Georgia Crime Information Center
Georgia Bureau of Investigation
Post Office Box 370748
Decatur, Georgia 30037
(404) 244-2840

Guam

Guam Police Department
Planning, Research and Development
Pedro's Plaza
287 West O'Brien Drive
Agana, Guam 96910
(671) 472-8911 x 418

Hawaii

Uniform Crime Reporting Program
Crime Prevention Program
Department of the Attorney General
Suite 701
810 Richards Street
Honolulu, Hawaii 96813
(808) 586-1416

Idaho

Criminal Identification Bureau
Department of Law Enforcement
700 South Stratford Drive
Meridian, Idaho 83680
(208) 884-7156

Illinois

Bureau of Identification
Illinois State Police
726 South College Street
Springfield, Illinois 62704
(217) 782-8263

Iowa

Iowa Department of Public Safety
Wallace State Office Building
Des Moines, Iowa 50319
(515) 281-8422

Kansas

Kansas Bureau of Investigation
1620 Southwest Tyler Street
Topeka, Kansas 66612
(913) 296-8200

Kentucky

Kentucky State Police
Information Services Branch
1250 Louisville Road
Frankfort, Kentucky 40601
(502) 227-8783

Louisiana

Louisiana Commission on Law Enforcement
12th Floor
1885 Wooddale Boulevard
Baton Rouge, Louisiana 70806
(504) 925-4440

Maine

Uniform Crime Reporting Division
Maine State Police
Station #42
36 Hospital Street
Augusta, Maine 04333
(207) 624-7004

Maryland

Central Records Division
Maryland State Police Department
1711 Belmont Avenue
Baltimore, Maryland 21244
(410) 298-3883

Massachusetts

Uniform Crime Reports
Crime Reporting Unit
CIS Fifth Floor
Massachusetts State Police
1010 Commonwealth Avenue
Boston, Massachusetts 02215
(508) 820-2110

Michigan

Uniform Crime Reporting Section
Michigan State Police
7150 Harris Drive
Lansing, Michigan 48913
(517) 322-5547

Minnesota

Office of Information Systems Management
Minnesota Department of Public Safety
Suite 100-H, Town Square
444 Cedar Street
St. Paul, Minnesota 55101
(612) 296-7589

BEST COPY AVAILABLE

Montana

Montana Board of Crime Control
303 North Roberts
Helena, Montana 59620
(406) 444-3604

Nebraska

Uniform Crime Reporting Section
The Nebraska Commission on Law Enforcement
and Criminal Justice
Post Office Box 94946
Lincoln, Nebraska 68509
(402) 471-3982

Nevada

Criminal Information Services
Nevada Highway Patrol
555 Wright Way
Carson City, Nevada 89711
(702) 687-5713

New Hampshire

Uniform Crime Report
Division of State Police
10 Hazen Drive
Concord, New Hampshire 03305
(603) 271-2509

New Jersey

Uniform Crime Reporting
Division of State Police
Post Office Box 7068
West Trenton, New Jersey 08628-0068
(609) 882-2000 x 2392

New York

Statistical Services
New York State Division of Criminal Justice Services
8th Floor, Mail Room
Executive Park Tower Building
Stuyvesant Plaza
Albany, New York 12203
(518) 457- 8381

North Carolina

Crime Reporting and Field Services
State Bureau of Information
Division of Criminal Information
407 North Blount Street
Raleigh, North Carolina 27601
(919) 733-3171

North Dakota

Information Services Section
Bureau of Criminal Investigation
Attorney General Office
Post Office Box 1054
Bismarck, North Dakota 58502
(701) 328-5500

Oklahoma
Uniform Crime Reporting Section
State Bureau of Investigation
Suite 300
6600 North Harvey
Oklahoma City, Oklahoma 73116
(405) 848-6724

Oregon
Law Enforcement Data Systems Division
Oregon Department of State Police
400 Public Service Building
Salem, Oregon 97310
(503) 378-3057

Pennsylvania
Bureau of Research and Development
Pennsylvania State Police
1800 Elmerton Avenue
Harrisburg, Pennsylvania 17110
(717) 783-5536

Puerto Rico
Superintendent
Puerto Rico Police
Post Office Box 70166
Puerto Nuevo Hato Rey
San Juan, Puerto Rico 00936
(809) 782-1540

Rhode Island
Rhode Island State Police
Post Office Box 185
North Scituate, Rhode Island 02857
(401) 444-1120

South Carolina
South Carolina Law Enforcement Division
Post Office Box 21398
Columbia, South Carolina 29221-1398
(803) 896-7162

South Dakota
South Dakota Statistical Analysis Center
c/o 500 East Capitol Avenue
Pierre, South Dakota 57501
(605) 773- 6310

Texas
Uniform Crime Reporting Bureau
Crime Records Division
Texas Department of Public Safety
Post Office Box 4143
Austin, Texas 78765-4143
(512) 465-2091

Utah
Uniform Crime Reporting
Utah Department of Public Safety
4501 South 2700 West
Salt Lake City, Utah 84119
(801) 965-4445

Vermont

Vermont Department of Public Safety
Post Office Box 189
Waterbury, Vermont 05676
(802) 244-8786

Virginia

Records Management Division
Department of State Police
Post Office Box 27472
Richmond, Virginia 23261-7472
(804) 674-2023

Virgin Islands

Records Bureau
Department of Public Safety
Post Office Box 210
Charlotte Amalie
Saint Thomas, Virgin Islands 00801
(809) 774-2211

Washington

Uniform Crime Reporting Program
Washington Association of Sheriffs and Police Chiefs
Post Office Box 826
Olympia, Washington 98507
(206) 586- 3221

West Virginia

Uniform Crime Reporting Program
725 Jefferson Road
South Charleston, West Virginia 25309
(304) 746-2267

Wisconsin

Office of Justice Assistance
2nd Floor
222 State Street
Madison, Wisconsin 53703
(608) 266-3323

Wyoming

Uniform Crime Reporting
Criminal Records Section
Division of Criminal Investigation
316 West 22nd Street
Cheyenne, Wyoming 82002
(307) 777-7625

APPENDIX H

State Contacts for the Behavioral Risk Factor Surveillance System

Behavioral Risk Factor Surveillance System
Stats Coordinators 1996

State	Coordinator	Phone Number	FAX Number
ALABAMA	Jamey Durham	334/0613-5300	334/240-3097
ALASKA	Patricia Owen	907/465-3140	907/465-2770
ARIZONA	Brian Bender	602/542-7335	602/542-7362
ARKANSAS	John Senner, Ph.D.	501/616-2497	501/651-2468
CALIFORNIA	Bonnie Davis, Ph.D.	916/327-2768	916/327-4657
COLORADO	Marilyn Leff, MSPH	303/692-2168	303/782-0095
CONNECTICUT	Mary Adams, MPH	860/566-7867	860/566-1217
DELAWARE	Fred Breukelman	302/739-4724	302/739-3008
FLORIDA	Doris McTague, MS	904/414-5654	904/488-2341
GEORGIA	Ed Pledger, MPA	404/657-2553	404/657-6624
GUAM	Cynthia Naval	011/671/7357307	011/671/7345910
HAWAII	James W. Cooper	808/586-4733	808/586-4606
IDAHO	Christopher Johnson, MPH	208/334-6571	208/33-4685
ILLINOIS	Bruce Steiner, MS	217/524-1064	217/524-4308
INDIANA	Nancy Costello, MPA	317/383-6571	317/383-6776
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APPENDIX I

State Kids Count Organizations

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APPENDIX J

Brief Description and Contacts for the National Child Abuse and Neglect Data System (NCANDS), and the Adoption and Foster Care Analysis and Reporting System (AFCARS)

The National Child Abuse and Neglect Data System (NCANDS)

The summary data component (SDC) of NCANDS contains key aggregate indicators of State child abuse and neglect statistics reported by each of the participating states (43 states in 1993). These data include information on reports and investigations as well as descriptive data on both victims and perpetrators. The system has been in operation since 1990.

For more information, and to order publications reporting state NCANDS data contact:

National Clearinghouse on Child Abuse and Neglect Information
P.O. Box 1182
Washington, D.C. 20013-1182
(800) 384-3366

Adoption and Foster Care Analysis and Reporting System (AFCARS)

AFCARS is a Federal reporting system for foster care and adoption data in which States are required to participate. Participants are required to develop a state automated reporting system designed to collect uniform, reliable information on children who are under the responsibility of the state title IV-B/IV-E agency for placement and care. The system was initiated in 1993. During the first reporting period in 1994, approximately 30 states supplied data. A major goal of the system is to develop high quality adoption and foster care data which are uniform across states.

The Children's Bureau, located within the Administration for Children and Families, U.S. Department of Health and Human Services, is overseeing the overall system, and providing technical assistance to the states in the development of their state reporting systems. The data are currently being cleaned and analyzed. Descriptive data for participating states will be made available to the public, though no date has yet been set for the public release of that information.

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